VOL. XII. OLD SERIES. PHILADELPHIA, DECEMBER, 1898. VOL. I. NO 12. NEW SERIES.

PUBLISHED IN CONJUNCTION WITH
Sajous's Annual and Analytical Cyclopædia of Practical Medicine.
PRICE OF THIS JOURNAL, SEPARATE, $5.00 PER YEAR.

THE Monthly Cyclopædia OF Practical Medicine AND UNIVERSAL MEDICAL JOURNAL.

EDITED BY
CHARLES E. de M. SAJOUS, M.D.,
PHILADELPHIA.

FEB 20 1936

LEADING ARTICLES: "Boils." "Leukæmia." "Meningitis." "Neuralgia." "Pneumonia in Children." "Pseudoleukæmia." "Vaccination."

THE F. A. DAVIS CO., Publishers.
Office: 1914 and 1916 Cherry Street, Philadelphia, Pa., U. S. A.
BRANCH OFFICES: New York, U. S. A., 117 W. Forty-Second St.; Chicago, Ill., U. S. A., 9 Lakeside Building.

Exchanges and editorial matter to be sent to 2043 Walnut Street, Philadelphia, Pa.
All letters concerning subscriptions, removals, advertisements, etc., to be sent to the Publishers.
This Journal should be carefully preserved for binding as an additional volume of the Cyclopædia at the end of each year.

Registered at the Philadelphia Post-Office as Second-Class Mail Matter.

MESSRS. FAIRCHILD BROS. & FOSTER

present their compliments to the *Medical Profession*, with best wishes for a **Merry Christmas** and a **Happy New Year.**

They desire also to take this occasion to express their acknowledgment and thanks for the continued recognition and encouragement they have received from the medical profession during the past year; and as the best earnest of their appreciation thereof, they pledge their unremitting efforts to offer the best possible products of the class originated and manufactured by "FAIRCHILD."

HENRY'S
Three Chlorides
(LIQ. FERRISENIC HENRY'S).
THE GLANDULAR STIMULANT AND CHALYBEATE TONIC.
Tonic, stomachic, antiscorbutic, hæmatinic and alterative.
In Anæmias, Chlorosis. A reconstructive in convalescence from any cause.
Makes Quantity and Quality of Blood.
DOSE: 1 or 2 drachms.
12 oz., $1.00.

HENRY'S
TRI-IODIDES.
(LIQ. SALI-IODIDE HENRY'S.)
ALTERATIVE { Antirheumatic. Antisyphilitic.
In lymphatic and visceral disturbances a uric acid solvent, and a reliable eliminant in all diathetic diseases.
8 oz., $1.00.
1 or 2 fluidrachms in water exercises a synergistic effect over the entire range of THE SALICYLATES AND IODIDES.

MAIZO-LITHIUM
(LIQ. LITHIUM MAIZENATE).
A POSITIVE DIURETIC.
STIMULATING, YET NON-IRRITATING.
In genito-urinary diseases, cystitis, incipient diabetes, lithæmia, urethritis, and all inflamed conditions requiring a non-irritating diuretic.
DOSE: 1 or 2 drachms
8 oz., $1.00.

LITERATURE ON APPLICATION. **HENRY PHARMACAL CO., LOUISVILLE, KY.**

PACKER'S TAR SOAP.

VEGETABLE OILS, PINE-TAR, AND GLYCERINE. PURE. ANTISEPTIC. EMOLLIENT.

THE STANDARD.— Used and recommended by the **Medical Profession** for a quarter of a century in the treatment of Dermatic Diseases, for cleansing fetid discharges, for making gynecological examinations, etc.

AS A SHAMPOOING AGENT PACKER'S TAR SOAP is undoubtedly the best known. It is extensively used, both as a delightful cleanser to preserve healthful conditions of the hair and scalp, and in treatment of dandruff and baldness.

THE PACKER MANUFACTURING CO., 81 Fulton Street, New York

Digitized by Microsoft®

BENSOLYPTUS

Schieffelin's

Alkaline Antiseptic and Prophylactic.

Bensolyptus is an agreeable alkaline solution of various highly approved antiseptics, so combined that one supplements the action of the other. Its ingredients are all of recognized value in the treatment of

Catarrhal Affections

because of their cleansing, soothing, and healing properties. Bensolyptus is highly recommended in all diseases of the nose and throat, both acute and chronic, and as a mouth-wash and dentifrice. It is also indicated for internal use in affections of the stomach and intestines where an agreeable, unirritating, and efficient antiseptic and antifermentative is required.

Pamphlets on application to

Schieffelin & Co., New York.

Schieffelin & Co.'s

(NEW YORK)

Soluble Pills and Granules.

Reliable. Soluble. Beautiful.

The Perfection of Pill Making.

Examine Them and Notice

Their Perfect Uniformity in size and weight.
The Crystal Transparency of the coating.
They are the only pills which show the precise colors of the masses.

Test Them and Prove

Their Ready Solubility.
Their Exact Conformity to their several Formulas.
The Certainty of Proper Therapeutic Effects.

Our list of Pills and Granules embraces those made according to the formulas of the U. S. Pharmacopœia; also most of those in common use among the profession.
We also manufacture pills to order.

SPECIFY Schieffelin's WHEN PRESCRIBING.

Digitized by Microsoft®

ALWAYS THE SAME. A STANDARD OF ANTISEPTIC WORTH.

Listerine.

LISTERINE is a non-toxic, non-irritating and non-escharotic antiseptic, composed of ozoniferous essences, vegetable antiseptics and benzo-boracic acid.

LISTERINE is to make and maintain surgical cleanliness in the antiseptic and prophylactic treatment and care of all parts of the human body.

LISTERINE is invaluable in obstetrics and gynæcology as a general cleansing, prophylactic, or antiseptic agent.

LISTERINE is useful in the treatment of the infectious maladies which are attended by inflammation of accessible surfaces—as diphtheria, scarlet fever and pertussis.

LISTERINE diluted with water or glycerine speedily relieves certain fermentative forms of indigestion.

LISTERINE is indispensable for the preservation of the teeth, and for maintaining the mucous membrane of the mouth in a healthy condition.

LISTERINE is of accurately determined and uniform antiseptic power, and of positive originality.

LISTERINE is kept in stock by all worthy pharmacists everywhere.

Lambert's Lithiated Hydrangea.

A valuable renal alterative and antilithic agent of marked service in the treatment of Cystitis, Gout, Rheumatism, and diseases of the Uric Diathesis generally.

LITERATURE UPON APPLICATION. LAMBERT PHARMACAL CO., ST. LOUIS.

HIGHLAND WATER

Is the Best Tonic, Diuretic, and Solvent Eliminator of Uric Acid:

1. **Because** it is the softest and purest water known, containing no excess of mineral salts and no lime or organic impurities, being therefore non-irritating to the digestive organs and kidneys.
2. **Because** it contains Iron in combination with the alkalies, Sodium and Potassium in small quantities, as recommended by Professors Flint, Thomson, Draper, and others.
3. **Because** it comes from a region free from malarial germs.
4. **Because** all its mineral salts, and five of them in the exact form given in its analysis, are found in the human blood, of which they form a most essential part.

At Grocers and Druggists, or

Office, 439 FIFTH AVENUE,

Telephone, 1763-38th St. NEW YORK.

SVAPNIA

OR

PURIFIED OPIUM

FOR PHYSICIANS USE ONLY.

Contains the Anodyne and Soporific Alkaloids, Codeia, Narceia and Morphia.

Excludes the Poisonous and Convulsive Alkaloids, Thebaine, Narcotine and Papaverine.

SVAPNIA has been in steadily increasing use for over twenty years, and whenever used has given great satisfaction.

To PHYSICIANS OF REPUTE, not already acquainted with its merits, samples will be mailed on application.

SVAPNIA is made to conform to a uniform standard of Opium of Ten per cent. Morphia strength.

JOHN FARR, Manufacturing Chemist, New York.

C. N. CRITTENTON, Gen'l Agent, 115 Fulton St., N. Y

To whom all orders for samples must be addressed.

SVAPNIA IS FOR SALE BY DRUGGISTS GENERALLY.

Digitized by Microsoft®

CONTINUE TO USE

Parke, Davis & Co.'s

Anti=Diphtheritic Serum

Potent.

Efficient.

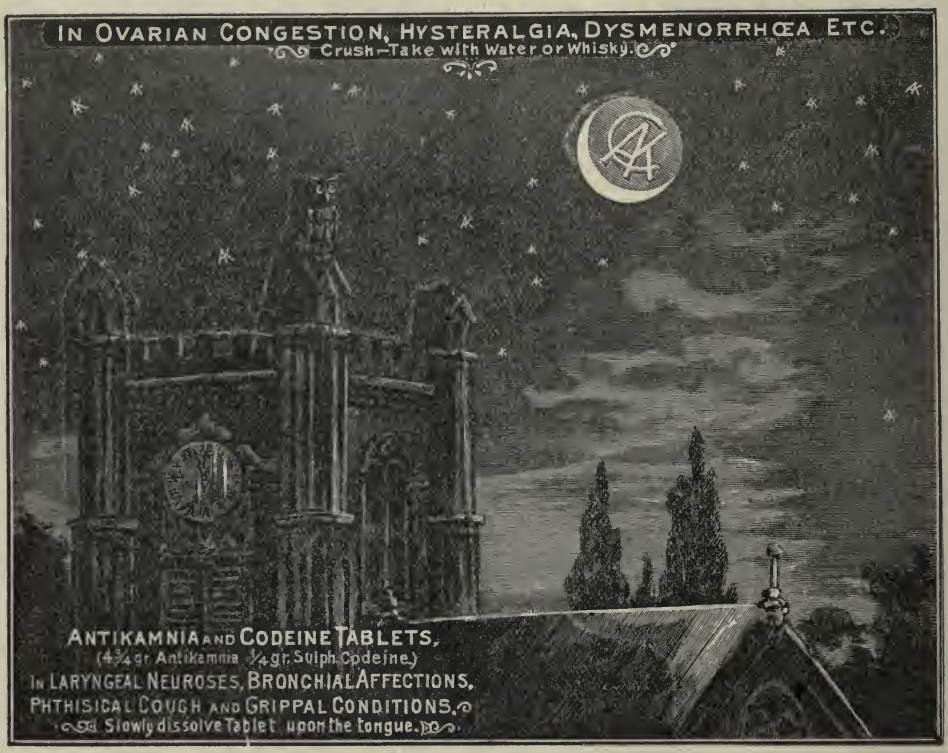
Reliable.

Remember too that P., D. & Co.'s serum is marketed in hermetically sealed bulbs (not ordinary vials and corks), which exclude the air and keep the serum strictly aseptic.

SPECIAL NOTICE.—The validity of the recent patent issued by the U. S. Patent Office on diphtheria antitoxin will be contested in the courts. Pending a decision in the case, we beg to announce that we shall, at our own expense, protect and defend pharmacists and physicians in any legal proceedings which may be brought as a result of the purchase, sale or use of "P., D. & Co.'s" Anti-Diphtheritic Serum. Order it at any time and in any quantity without hesitation.

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®


IN OVARIAN CONGESTION, HYSTERALGIA, DYSMENORRHŒA ETC.
Crush—Take with Water or Whisky.
ANTIKAMNIA AND CODEINE TABLETS,
(4¾gr. Antikamnia ¼gr. Sulph. Codeine.)
IN LARYNGEAL NEUROSES, BRONCHIAL AFFECTIONS,
PHTHISICAL COUGH AND GRIPPAL CONDITIONS.
Slowly dissolve Tablet upon the tongue.

SYRUPUS ROBORANS.

Syr. Hypophos Comp. with Quin., Mangan., and Strych. 1-128 gr. Strychnine to teaspoonful.

Syrupus Roborans as a Tonic during Convalescence has no equal.

As a nerve stimulant and restorative in wasting and debilitating diseases, as a constructive agent in Insomnia, Pneumonia, Tuberculosis, Bronchial Asthma, Marasmus, Strumous Diseases, and General Debility, this compound has no superior.

SYRUPUS ROBORANS is in perfect solution and will keep in any climate.

DR. T. H. STUCKY writes: In a case of Tertiary Syphilis, very anæmic, the Iodides were revolting to the stomach, being vomited when taken Syrupus Roborans given three weeks with improvement, when the Iodide of Potassium was retained with good results.

DR. W. O. ROBERTS says: In cases convalescing from "La Grippe" **Syrupus Roborans** has no equal.

For Sale by all Wholesale Druggists.

PETER'S PEPTIC ESSENCE CO.

A Powerful Digestive Fluid in Palatable Form.

Please note that Essence and Elixir Pepsin contain only Pepsin, while in Peter's Peptic Essence we have all the digestive ferments. These are preserved in solution with **C. P. Glycerin** in a manner retaining their full therapeutic value, which is exerted in and beyond the stomach.

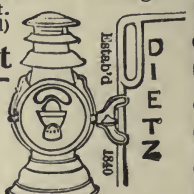
It is a Stomachic Tonic, and relieves Indigestion, Flatulency and has the remarkable property of arresting Vomiting during pregnancy. It is a remedy of great value in Gastralgia, Enteralgia, Cholera Infantum, and Intestinal derangements, especially those of an Inflammatory character. For nursing mothers and teething children it has no superior. Samples sent upon application. Express charges at your expense.

ARTHUR PETER & CO., Louisville, Ky.

Dietz Driving Lamp

IT is the only perfect one.
IT throws all the light straight ahead from 200 to 300 feet.
IT looks like a locomotive headlight.
IT gives a clear white light.
IT burns kerosene (Coal Oil)

It will not blow nor jar out



SPECIAL OFFER. CUT THIS ADVERTISEMENT OUT and send it to us and we will send book describing our lamp, and will agree to send you one single lamp or a pair at our wholesale price (very much less than the retail price).

R. E. DIETZ COMPANY, 60 Laight St., New York.
ESTABLISHED 1840.

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®

GLYCO-THYMOLINE (KRESS)

NASAL DOUCHE

NASAL CATARRH

An Alkaline, Antiseptic, Non-irritating, Cleansing Solution for the Treatment of Diseased Mucous Membrane, particularly Nasal Catarrh.

"In the treatment of Hypertrophic Rhinitis do not forget to cleanse the passages; this is the fundamental principle of successful treatment, and as such a saline solution, such as Glyco-Thymoline (Kress), is practically the best remedy for the purpose. It cleanses and it heals, it causes a proper degree of healthy stimulation, it acts as an antiseptic and is a most efficient deodorizer."—*Journal of the American Medical Association* for October 24, 1896.

SPECIAL OFFER A full-size bottle of Glyco-Thymoline (Kress) will be sent to any physician who will pay express charges.

K & O Douche to Physicians, 15 Cents; $1.50 per Dozen. Retail 25 Cents. Remit Stamps.

KRESS & OWEN COMPANY, Chemists, 221 Fulton Street, New York

WELCH'S GRAPE JUICE

CONTAINS ALL THE NUTRIENT PROPERTIES OF THE CONCORD GRAPE, WITH THE SKIN AND SEEDS REMOVED. IT IS THE BRIGHT RED BLOOD OF THE GRAPE, UNCHANGED IN THE PROCESS FROM THE LUSCIOUS CLUSTER TO YOUR PATIENT'S GLASS, AND BUT LITTLE CHANGED FROM GRAPE JUICE TO BLOOD.

WELCH'S GRAPE JUICE IS NOT A MEDICINE, IT IS NOT A STIMULANT—IT IS A LIQUID BREAD, A PERFECT FOOD. IN FEVERS AND WASTING DISEASES IT PRODUCES AN IMMEDIATE VIGOR FROM WHICH THERE IS NO REACTION.

PINT BOTTLE FREE TO ANY PHYSICIAN WHO WILL PAY EXPRESS CHARGES. 3 OZ. BOTTLE 10 CENTS. BOOKLET FREE

WELCH GRAPE JUICE CO., Westfield, N. Y.

ESTABLISHED, VINELAND, N. J., 1869.

Digitized by Microsoft®

ZE-AN (N., B. & CO.)

A Concentrated Fluid Extract of Corn Silk.

Ze-an (N., B. & Co.) is the most active diuretic of the materia medica, a solvent of uric acid and phosphatic gravel and an anodyne to the genito-urinary mucous membrane.

Ze-an (N. B. & Co.) is *par excellence* the remedy for

NEPHRITIS
CYSTITIS
URETHRITIS
and for **URIC ACID** and
PHOSPHATIC GRAVEL.

Useful also for the removal of dropsical effusions.

UTEROTONIC

(N., B. & Co.)

A combination in palatable form of Squaw Vine, Black Haw, Jamaica Dogwood, Golden Seal, Black Cohosh, Cascara Sagrada, Hyoscyamus and Potassium Bromide.

UTEROTONIC (N., B. & Co.) is the most successful remedy yet offered for atonicity and irritability of the uterus and ovaries,

Dysmenorrhœa,
Menorrhagia,
Ovarian Neuralgia,
Endometritis,
and as a preparation for **Parturition,**

Increasing the force and lessening the pain of the uterine contractions.

Full Descriptive Pamphlets and Samples of the above furnished on application to

NELSON, BAKER & CO.,

Manufacturing Pharmacists, - DETROIT, MICH.

Digitized by Microsoft®

DUOTAL (Guaiacol Carbonate)

AND CREOSOTAL

(Creosote Carbonate)

are the most eligible and effective of germicides, and the most vigorous neutralizers of microbic poisons in the intestinal tract. The remarkable results obtained in tuberculosis, typhoid fever, rheumatoid arthritis, etc., are explainable by the great powers of elimination of toxalbumins that these remedies have been proven to possess. They are themselves neutral, non-toxic, and absolutely free from all caustic and irritant qualities.

At the Clinic of **Professor E. VON LEYDEN,** at Berlin, Creosotal has been used in a large number of cases of **phthisis pulmonum** with very good results. It agreed well with all the patients. It had a very favorable effect upon the night sweats and the fevers; and the cough and expectoration either disappeared entirely, or were markedly improved. The body weight increased in most cases.

Dr. PAUL JACOB, Physician-in-Chief of Professor Von Leyden's Clinic, whose report is published in full in the Charité Annalen, Berlin, 1897, claims **that Creosotal has a specific action in phthisis, and that every case that is not too far advanced can be greatly benefited by its use.**

ORPHOL (Betanaphtol-Bismuth-Von Heyden)

The employment of Orphol, which is a neutral, odorless, tasteless and non-toxic powder, is indicated in all fermentative gastro-intestinal processes, in ptomaine poisonings, gastro-enteric catarrhs, typhoid fever, etc. **Practical Intestinal Antisepsis** can be effected and maintained by its use. Unlike opium, tannin, etc., Orphol in no way interferes with the digestion, so that patients suffering from dyspepsia bear it well.

Betanaphtol-Bismuth is antiseptic as well as astringent, and is therefore far superior to the new tannin compounds recently introduced; for tannin is well known not to possess any bactericide action at all. Four or five 15-grain doses of Orphol will usually cure the very worst cases of diarrhœa; and in cholera infantum 2 to 5 grains administered every three or four hours act admirably.

Orphol is soothing to the irritated and inflamed intestinal mucous membrane, besides acting as a continuous disinfectant. It does away with the dangers of caustic or poisonous antiseptic substances, such as carbolic acid, naphtol, resorcin, the bichloride of mercury, etc., and the use of complicated and uncertain diarrhœa and cholera mixtures.

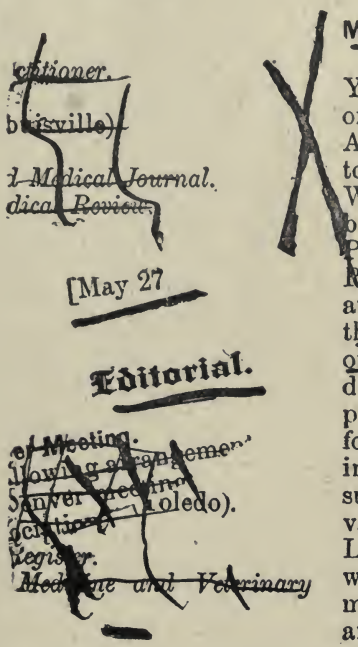
XEROFORM (Tribromphenol-Bismuth-Von Heyden)

Xeroform is the ideal substitute for iodoform, being an antiseptic, desiccating and deodorizing agent which is odorless, non-poisonous and non-irritating, with very powerful antibacterial properties. Professors Hueppe and Fasano, Dr. Reynders, and others, have found it to be a very effectual intestinal antiseptic in cholera, intestinal tuberculosis, etc.; but its chief application is as an external antiseptic in the place of iodoform. Xeroform has been employed by Drs. Heuss, Cumston, Grünfeld, Beyer, Metall, Paschkis, and many other observers, in the most varied surgical affections; for operative procedures, amputations, enucleations, and cancer operations; for suppurative bursitis, lymphadenitis, and alveolar periostitis; for paronychias, deep abscesses, and suppurating buboes. In venereal diseases it has been extensively employed in the treatment of chancroid; and in dermatology for impetigo, furunculosis, sycosis, eczema and pruritus. It has also been successfully used in ophthalmic and gynæcological practice, and for insufflation into the nose and ear. Its fine pulverization enables the physician to cover a large surface with a very small quantity of the drug.

Literature furnished on application.

SCHERING & GLATZ, 58 Maiden Lane, New York,
Sole Agents for the United States.

Digitized by Microsoft®



Maltzyme Preparations,

Introduced by the Malt-Diastase Co., of New York city, are unquestionably of the very best of the diastatic preparations on the market. Although they take the lead from the laboratory standpoint, as shown by reports from Dr. Willis G. Tucker, Professor of Chemistry, Albany Medical College, Dr. Geo. C. Diekman, Ph. G., Professor of Theoretical and Practical Pharmacy, New York College of Pharmacy, and other laboratory workers of like ability, they are receiving the more valuable approval of clinical endorsation. This enzyme has a direct value as a nutrient; and its diastatic property is marked in bringing the starch in food into a soluble condition, and converting it into easily assimilable forms of dextrin and sugar. A striking quality of one of the most valuable preparations—Maltzyme with Cod Liver oil—consists in its fluidity, the readiness with which it is poured from the bottle and its miscibility with water. Try it in suitable cases; and report the results.

Beer as a Remedy

Typhoid Fever

During convalescence from fever, when the heart and stomach have been weakened and the digestion is weak, malt liquors properly brewed increase the appetite, digestion and nutrition. (VARIOUS TEXT BOOKS ON THERAPEUTICS.)

American Physicians have at their disposal the best beer in existence

Tannhæuser and Old Stock Lager

THE WORLD'S JUDGMENT OF OUR PRODUCT

Philadelphia, 1876, Two Medals; Paris, 1878, Grand Prize; Brussels, 1888, Grand Gold Medal and Diploma of Honor; Paris, 1889, Grand Prize; Chicago, 1893, Four Prizes; Antwerp, 1894, Grand Prize; Amsterdam, 1895, Grand Prize; Brussels, 1897, Grand Prize.

The Bergner & Engel Brewing Co., Philadelphia

In writing to advertisers mention Monthly Cyclopædia

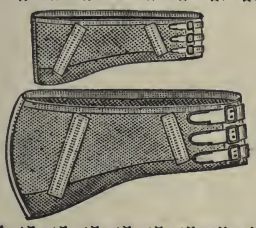
Digitized by Microsoft®

PHENÀLGIN (ETNA)

"Among the many hypnotics offered the medical profession during the past few years, Phenàlgin certainly takes the lead. Its greatest superiority is found in the well-established fact that it does not cause any heart depression, nor is there any reaction following its continued administration. In doses of five or ten grains it overcomes pain, and produces the most refreshing sleep, from which the patient awakes exhilarated and invigorated."—*The N. Y. Polyclinic.*

Phenàlgin is sold by every wholesale druggist. Your retailer can obtain it for you without delay or trouble. Generous samples of powder or tablets sent free by mail to physicians.

ETNA CHEMICAL CO., 313 West St., New York, U. S. A.



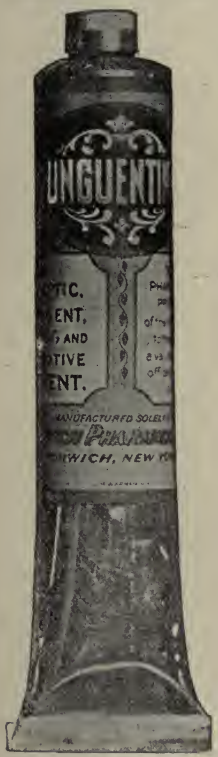
ABDOMINAL SUPPORTING BELTS

for every condition requiring abdominal support. Our Belts are made to measurements, and they fit; consequently, they are efficient. Price lists and order blanks sent on request.

SPECIALTIES.—Pomeroy Frame Truss, "Master" Elastic Stockings.

POMEROY COMPANY.

19 W. Union Square, New York City.



AN ANTISEPTIC DRESSING IN AN ANTISEPTIC PACKAGE.

PROGRESS IN SURGERY

has been largely due to antiseptic preparations and aseptic methods. One great want of the surgeon and general practitioner has been a surgical dressing that was thoroughly antiseptic, put up in a thoroughly antiseptic container and applicable wherever inflammation was present. Unguentine in the collapsible tube fills this want. Observing physicians will admit that there is danger of contaminating an antiseptic ointment when put up in jars or other containers where a large surface is exposed when the lid or cover is left off or not securely replaced. Acting upon the suggestions of prominent physicians we take pleasure in offering to the profession Unguentine in the collapsible tube, which gives an antiseptic dressing put up in a thoroughly antiseptic container.

Its advantages are many. The physician can carry it in his case without danger of soiling either instruments, labels, or any of its contents. It is most convenient, as the ointment can be easily applied on skin or bandage without the use of a spatula or other instrument; and on account of size of the package you can always have the best surgical dressing for minor work with you.

It is the most economical, as it is the least expensive.

The tube holds about two ozs. and costs 25 cents. From the numerous letters of commendation we have already received from the profession we feel sure that the friends and users of Unguentine are pleased with this new container.

To introduce Unguentine to you in the collapsible tube we will be pleased to send you, upon request, one tube, free of expense.

THE NORWICH PHARMACAL COMPANY,

SOLE MANUFACTURERS, NORWICH, NEW YORK.

Digitized by Microsoft®

MALTINE is a highly concentrated extract of barley, wheat, and oats. Barley alone is employed in the manufacture of all other malt extracts, and not one of them is as highly concentrated as MALTINE.

MALT EXTRACTS, which are thinner than MALTINE, are thinner for the simple reason that they contain more water—are not concentrated as MALTINE is, and, therefore, are less nutritious and more costly.

Maltine

MALTINE is rendered particularly delicious and refreshing if administered with any of the aerated waters, milk, wine or spirits. Thus a pleasing change is afforded to capricious or fastidious invalids.

MALTINE, aside from its great nutritive value, is so rich in Diastase that a dose readily digests all the starchy food, such as bread, potatoes, and cake, which the average adult eats at a single meal.

DOCTOR Do You Cure Your Goitre Patients?

I cure all of mine and receive from **$25** to **$50** from each of them. The cost of treating a case will not exceed $1.00 Enclose a 2-cent stamp for particulars.

Lock Box 604. F. E. MAY, M. D., Bloomington, Ill.

PLANTEN'S CAPSULES AND PERLOIDS TRADE MARK OF SANDAL OIL

CAPSULES.

			PER DOZ.
No. 53A	10 Minims Size.	12 in Box	$2.25
" 53		24 "	4.25
" 54		36 "	6.25
" 54C		100 "	15.00

"PERLOIDS,"

OR IMPROVED FRENCH "PERLES."

			PER DOZ.
No. 421A	5 Minims Size.	40 in Vial	$ 4.75
" 421B		80 "	9.00
" 421C		100 "	10.20

Sent carriage paid on receipt of price.

H. PLANTEN & SON (Established 1836), New York.

Manufacturers of
FILLED AND EMPTY GELATINE CAPSULES.

The American
THERAPIST

A Monthly Record of Modern Therapeutics.

Original, Practical, Independent, Interesting.

SUBSCRIPTIONS SOLICITED.

$1.00 PER YEAR

Sample Copies, 10 cts.

THE AMERICAN THERAPIST PUBLISHING CO.,
Lock Box 1170. New York.

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®

Uniformly Effective, Agreeable and Lasting,—the Standard Preparation of Erythroxylon Coca

During past 30 years most popularly used Tonic-Stimulant in Hospitals, Public and Religious Institutions everywhere.

VIN MARIANI

We have received over 7000 written endorsements from PROMINENT PHYSICIANS in Europe and America.

"MARIANI WINE"

FORMULA: The concentrated extract—the aromatic principle of the fresh Coca Leaf, blended with a special quality of grape juice of southern France.

DOSE: Wine-glassful three times a day, or more or less at Physician's discretion.

Nourishes - Fortifies - Refreshes

AIDS DIGESTION - STRENGTHENS THE SYSTEM

AGREEABLE TONIC-STIMULANT WITHOUT UNPLEASANT REACTION.

To avoid disappointment please specify "Vin Mariani."

SOLD AT ALL PHARMACIES.

PARIS: 41 Boulevard Haussmann.
LONDON: 239 Oxford Street.
MONTREAL: 28 Hospital Street.

MARIANI & CO., 52 W. 15th St., New York.

VEREINIGTE CHININFABRIKEN.
ZIMMER & CO., Frankfort, O. M.

EUQUININE TASTELESS, NONTOXIC.

As effective as Quinine in MALARIA.
Especially indicated in CHILDREN'S CASES.
Specific in WHOOPING-COUGH.

EUNATROL Very effective in GALL-STONE and kindred Gall or Liver troubles. Can be taken in Pill Form without after-effects for months.

VALIDOL ANALEPTIC and ANTIHYSTERIC.

Specific against SEASICKNESS.

Apply for Samples and Literature to
R. W. PHAIR & CO., Agents,
16 PLATT STREET, NEW YORK.

Gárofen

THE NEW VEGETABLE
ANALGESIC ANTIPYRETIC

Contains no Coal-Tar Products nor Opium or its Alkaloids in any form.

PRICE, $1.00 PER OZ.
BY MAIL

CAMPHO-PHÉNIQUE POWDER

The Standard Dry Antiseptic Dressing. Superior to Iodoform.

PRICE, 50 CENTS PER OZ.
BY MAIL

For Samples, Literature, and Reports Address

PHÉNIQUE CHEMICAL CO.

ST. LOUIS, MO., U.S.A.

Digitized by Microsoft®

WHY SPECIFY

PEACOCK'S BROMIDES?

Because the salts entering its composition are absolutely neutral and chemically pure; its standard of strength is constant, and its action will not create nausea, so frequently attending the administration of the commercial salts. It is a scientific blending of the five bromides of Potassium, Sodium, Ammonium, Calcium, and Lithium, each fluid drachm representing fifteen grains of the combined salts. In this form the bromide treatment may be employed with the best possible results, and the least possible evil effects.

DOSE: ONE OR TWO TEASPOONFULS THREE OR FOUR TIMES A DAY, AS INDICATED.

CHIONIA.

AN INNOVATION IN HEPATIC STIMULATION.

Acting purely as an hepatic stimulant without producing severe catharsis, its physiological action is gradual but certain. It stimulates portal circulation, and strengthens the lymphatics. This makes it a valuable addition in the general treatment of all diseases in which the liver has become sluggish. As a clinical test for the above facts, administer Chionia in connection with your tonic treatment, and note the largely increased action of the tonic.

DOSE: A TEASPOONFUL THREE OR FOUR TIMES A DAY.

PUT UP IN HALF-POUND BOTTLES ONLY.

Samples of PEACOCK'S BROMIDES and CHIONIA to Physicians who will pay Express Charges.

PEACOCK CHEMICAL COMPANY, St. Louis and London.

CACTINA PILLETS

SAFE AND RELIABLE IN ALL

HEART TROUBLES.

DOSE: One pillet every hour, or less frequent, as may be necessary.

SAMPLE MAILED FREE TO PHYSICIANS.

SENG

DIGESTIVE SECERNENT

Increases the amount and quality of the digestive fluids, thus improving

DIGESTION.

DOSE: A teaspoonful before meals. The dose before breakfast preferably taken in tumbler hot water.

Sample to Physicians who will pay Express Charges.

SULTAN DRUG COMPANY, St. Louis and London.

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®

THE GREAT FACT IN MODERN MEDICINE:

"The Blood is the Life,"
And Where Nature fails to make Good Blood,
WE CAN INTRODUCE IT.

BOVININE is Bovine Blood Unaltered from the Arteries of the Bullock;
The Universal Auxiliary of Modern Medicine and Surgery,
and the TRUE "ANTITOXIN" of Healthy Nature.

In the more enlightened progress of Modern Medicine, "Blood-letting" has given place to Blood-*getting*.

Aye! Get Good Blood—but How? Not by the Alimentary Process. It has already failed to do its work (else the patient would not be sick); and in acute disease must not even be allowed to do the work it can. Stimulate as you will, the whole sum of the patient's alimentary power when fully forced into play, is unable to keep up the nourishing and supporting contents of the blood. There is absolutely but one thing to do; and, thank God, that can be done, usually with success, as ten-thousand-fold experience has proved. That one thing is this: where Nature fails to PRODUCE good and sufficient Blood, WE CAN INTRODUCE IT from the arteries of the sturdy bullock, by the medium of BOVININE.

The vital activity of this living blood conserve rests on no man's assertion: it speaks for itself, to every properly equipped physician who will test its properties microscopically, physically, or therapeutically.

TRY IT IN PRACTICE.

TRY it in ***Anæmia,*** measuring the increase of red cells and hæmaglobin in the blood as you proceed, together with the improving strength and functions of your patient.

Try it in ***Consumption,*** with the same tests from week to week.

Try it in ***Dyspepsia*** or Malnutrition of young or old, and watch the recuperation of the paralysed alimentary powers.

Try it in ***Intestinal*** or gastric irritation, inflammation, or ulceration, that inhibits food itself, and witness the nourishing, supporting and healing work done entirely by absorption, without the slightest functional labor or irritation; even in the most delicate and critical conditions, such as Typhoid Fever and other dangerous gastro-intestinal diseases, Cholera Infantum, Marasmus, Diarrhœa, Dysentery, etc.

Try it per rectum, when the stomach is entirely unavailable or inadequate.

Try it by ***subcutaneous*** injection, when collapse calls for instantaneous blood supply—so much better than blood-*dilution!*

Try it on ***Chronic Ulceration,*** in connection with your antiseptic and stimulating treatment (which affords no nourishment) and prove the certainty and power or topical blood nutrition, abolishing pus, stench, and PAIN, and healing with magical rapidity and *finality.*

Try it in ***Chronic Catarrhal*** Diseases; spraying it on the diseased surfaces, with immediate addition of peroxide of hydrogen; wash off instantly the decomposed exudation, scabs and dead tissue with antiseptic solution (Thiersch's); and then see how the mucous membrane stripped open and clean, will absorb nutrition, vitality and health from intermediate applications of pure bovinine.

Try it on the ***Diphtheritic Membrane*** itself, by the same process; so keeping the parts clean and unobstructed, washing away the poison, and meanwhile sustaining the strength independently of the impaired alimentary process and of exhaustive stimulants.

Try it on ***anything,*** except plethora or unreduced inflammation; but first take time to regulate the secretions and functions.

Try it on the ***patient*** tentatively at first, to see how much and how often, and in what medium, it will prove most acceptable—in water, milk, coffee, wine, grape, lemon or lime juice, broth, etc. A few cases may even have to begin by drops in crushed ice.

A New Hand-book of Hæmatherapy for 1898, epitomizing the clinical experience of the previous three or four years, from the extensive reports of Hospital and private practice. To be obtained of

THE BOVININE COMPANY, 75 W. Houston Street, New York.

LEEMING, MILES & Co., Montreal, Sole Agents for the Dominion of Canada.

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®

Dynamite!!!

is an annihilator.
So is nitroglycerin. It

Breaks up Asthma

almost magically.

Combined with Strychnine and Morphine it is the most successful because the most rational physiological treatment of the asthmatic paroxysm. The attack is jugulated at once. Our hypodermic tablets of

	Nitroglycerin	1-100 gr.
	Strychnine Sulph.	1-100 gr.
or	Nitroglycerin	1-50 gr.
	Strychnine Sulph.	1-50 gr.
or	Nitroglycerin	1-50 gr.
	Strychnine Sulph.	1-50 gr.
	Morphine Sulph.	1-20 gr.

are most earnestly recommended. Free Samples.

SHARP & DOHME

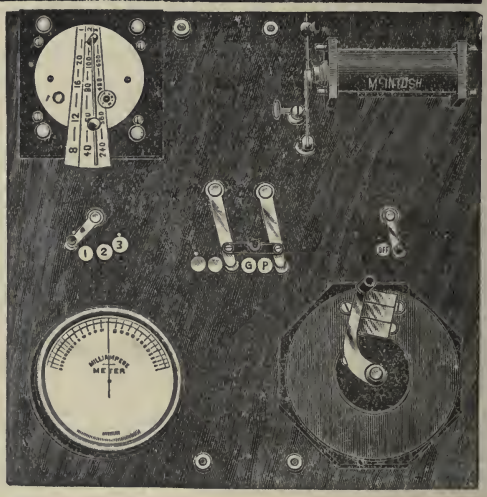
BALTIMORE

CHICAGO NEW YORK

The Best Medical

Electrical Apparatus

In the World.



TREATISE ON ELECTRO-THERAPY

FREE.

300 pages. 450 Illustrations.

Giving complete electrical technique of such operations as **Reduction of Strictures; Treatment of Dysmenorrhœa; Removal of Superfluous Hair, Warts, Moles, Nævi, &c.; Cataphoresis; Electro-Diagnosis; Metallic Electrolysis;** also giving prices and descriptions. We are desirous of placing this *educator* in the hands of every physician in the land, and will send it **post-paid, without charge,** if you will write and ask for it.

McINTOSH BATTERY AND OPTICAL CO.,

521-531 Wabash Avenue, CHICAGO, ILL.

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®

THE BEST PREPARED FOOD.

FOR THE BABY, THE INVALID, THE CONVALESCENT, THE AGED.

HIGHEST AWARDS WHEREVER EXHIBITED.

IT CONTAINS NO CANE SUGAR, NO GLUCOSE, NO MALT.

IMPERIAL GRANUM

NOURISHING STRENGTHENING.

PURE SAFE

PALATABLE RELIABLE

IS THE STANDARD PREPARED FOOD OF TO-DAY AND WILL CONTINUE

NEARLY ALWAYS SUCCESSFUL WHEN ALL OTHER KINDS OF NOURISHMENT HAVE FAILED.

SAMPLES FOR CLINICAL TEST SUPPLIED TO PHYSICIANS AND TRAINED NURSES ON REQUEST.

TO YIELD SATISFACTORY RESULTS IN NUTRITION FAR INTO THE FUTURE, BECAUSE ITS MERITS HAVE BEEN PROVED BY CLINICAL SUCCESS IN THE PAST.

Shipping Depot, JOHN CARLE & SONS, 153 Water Street, New York.

SOLD BY DRUGGISTS EVERYWHERE.

IMPERIAL GRANUM PREPARED FOOD FOR INVALIDS AND CHILDREN

Lycetol — The Uric Acid Solvent and Anti-arthritic.

An Important Advance in Gonorrhœa Therapeutics. Protargol

Iodothyrine — The Active Principle of the Thyroid Gland.

The Modern Hypnotic. Trional

Salophen — The Safest, Most Agreeable and Reliable Anti-rheumatic.

Send for samples and literature to

FARBENFABRIKEN OF ELBERFELD CO., 40 Stone St., New York.

Selling agents for the Bayer Pharmaceutical Products:

Aristol, Creosote Carbonate (Creosotal), Europhen, Ferro-Somatose, Guaiacol Carbonate (Duotal), Hemicranin, Heroin, Iodothyrine, Lacto-Somatose, Losophan, Lycetol, Phenacetin, Piperazine-Bayer, Protargol, Quinalgen, Salicylic Acid, Salophen, Somatose, Sulfonal, Tannigen, Tannopine, Trional.

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®

The only prominent Emulsion of Cod-Liver Oil introduced directly to the medical profession. It is advertised exclusively in medical journals.

HYDROLEINE.

(HYDRATED OIL.)

Produces rapid increase in Flesh and Strength.

FORMULA.—Each Dose contains	
Pure Cod Liver Oil..80 m. (drops)	Soda ..... 1-3 Grains
Distilled Water.....35 "	Salicylic Acid ..1-4 "
Soluble Pancreatin 5 Grains.	

Recommended and Prescribed by EMINENT PHYSICIANS Everywhere. It is pleasant to the Taste and acceptable to the most delicate Stomach

IT IS ECONOMICAL IN USE AND CERTAIN IN RESULTS.

HYDROLEINE (Hydrated Oil) is not a simple alkaline emulsion of oleum morrhuæ, but a hydro-pancreated preparation, containing acids and a small percentage of soda. Pancreatin is the digestive principle of fatty foods, and in the soluble form here used, readily converts the oleaginous material into assimilable matter, a change so necessary to the reparative process in all wasting diseases

Lautenbach's Researches on the functions of the liver would show the beautiful adjustment of therapeutics in preparation of Hydroleine, furnishing, as it does, the acid and soda necessary to prevent self-poisoning by re-absorption of morbid tubercular detritus and purulent matters into the general circulation.

In Wasting Diseases the most prominent symptom is ***emaciation,*** the result of starvation of the fatty tissues of the body as well as the brain and nerves This tendency to emaciation and loss of weight is arrested by the regular use of ***Hydroleine,*** which may be discontinued when the usual average weight has been permanently regained.

The following are some of the diseases in which **HYDROLEINE** is indicated

Phthisis, Tuberculosis, Bronchitis, Catarrh, Cough,

Scrofula, Chlorosis, General Debility, etc.

To Brain Workers of all classes, ***Hydroleine*** is invaluable, supplying as it does, the true brain-food, and being more easily assimilated by the digestive organs than any other emulsion.

The principles upon which this discovery is based have been described in a treatise on "The Digestion and Assimilation of Fats in the Human Body," by H C. BARTLETT, Ph. D, F.C.S, and the experiments which were made, together with cases illustrating the effect of Hydrated Oil in practice, are concisely stated in a treatise on "Consumption and Wasting Diseases," by G. OVEREND DREWRY, M. D.

COPIES OF THESE WORKS SENT FREE ON APPLICATION.

Sold by all Druggists at $1.00 per Bottle.

C. N. CRITTENTON,

SOLE AGENT FOR THE UNITED STATES. 115 FULTON STREET, N. Y.

A Sample of Hydroleine will be sent free upon application, to any physician (enclosing business card) in the U. S.

Please mention this Journal.

Digitized by Microsoft®

THE

MONTHLY CYCLOPÆDIA

OF

PRACTICAL MEDICINE.

Vol. XII. Old Series. PHILADELPHIA, DECEMBER, 1898. Vol. I. No. 12. New Series.

TABLE OF CONTENTS.

PAGE

ALBUMOSURIA. Wood 459
APHONIA 459
Treatment. Albert Abrams 459
ARTIFICIAL FEEDING OF INFANTS. Gregor, Keller 460
BOILS (FURUNCULOSIS) 441
Treatment. Albert Robin, Skillern, L. Duncan Bulkley, Field, Burlureaux 441
CARIES OF THE TEETH AND DISEASES OF THE STOMACH. Stark 460
Treatment. Charles D. Aaron 461
CHOREA 462
Treatment. W. Essex Wynter 462
CIRRHOSIS, ATROPHIC, OF LIVER 462
Treatment. S. Talma 462
CIRRHOSIS, HYPERTROPHIC, OF LIVER. Kirikow 462
CONGENITAL LARYNGEAL STRIDOR, OR INFANTILE RESPIRATORY SPASMS 462
Diagnosis. C. Stamm 462
CURETTAGE OF THE UTERUS. William H. Wathen 463
DEAFNESS, INHERITED, SYPHILITIC. Urban Pritchard, Arthur Cheatle 464
DEGENERACY, STIGMATA. Talbot, James G. Kiernan 464
ERGOT IN CHRONIC MALARIA. A. Jacobi 465
ERYTHEMA ENEMATOGENES (ENEMA RASH) IN CHILDREN. Still 465
GLAUCOMA, EARLY RECOGNITION OF, BY A GENERAL PRACTITIONER. J. E. Morrison 466

PAGE

HEADACHE. William H. Wilder 466
HEROIN. Dresser, Morris Manges 466
HYDROCHLORIC ACID IN TREATMENT OF DISEASES OF THE STOMACH. Riegel, Kuhn, Strauss, Hemmeter, Boardman Reed 467
HYMEN, UNRUPTURED, IN PREGNANCY. Albespy 468
INOPERABLE ANGIOSARCOMA CURED BY ELECTROLYSIS. Paul Videbech 469
LEUKÆMIA 443
Diagnosis. Magnus-Levy, Benda, A. Fraenkel 443
Etiology. L. Pollmann 444
Pathology. Nonne, Otto Barnick 444
LUPUS. William Anderson 445
MASTITIS 469
Treatment. J. B. Jackson 469
MENINGITIS 445
Diagnosis. Williams, William L. Stowell, Stoelzner, Heubner 446
Etiology. Wolf, Lapersonne, G. F. Still, Weichselbaum, Jaeger 447
Pathology. Lewellys F. Barker 447
Symptoms. J. W. Carr, A. E. Davis 445
Treatment. Dinami 448
MYXŒDEMA. William M. Ord 470
NEPHRITIS OF MALARIAL ORIGIN. William Sidney Thayer 470
NEURALGIA 448
Phrenic Neuralgia. DIAGNOSIS. Jousset 448
Symptoms. Osler, Oppenheim, W. H. Brown 448
Treatment. Levacher, Krause, Krauss, Walsh, Eulenberg, Frank, Capitan, Marchant, Herbet 448

PAGE

PATENTING OF ANTITOXIN. (Editorial) 446
PHENOCOLL. V. Cervello, Cesare Mondini 471
PILONIDAL SINUS. Editorial, Phila. Med. Jour 471
PNEUMONIA IN CHILDREN 450
Etiology. Dürck 451
Symptoms. Schlesinger, Aufrecht 450
Treatment. H. D. Chapin, Barnch, L. Emmett Holt, F. M. Crandall, W. P. Northrup, Berg 451
PROLAPSE OF THE FUNDUS 472
Treatment. R. Abrahams 472
PSEUDOLEUKÆMIA (HODGKIN'S DISEASE) 454
Symptoms. F. H. Edgeworth 454
Treatment. J. D. L. Macalister 454
SOMATOSE. Felix Heymann 473
SPINA BIFIDA 473
Treatment. Nicoll 473
STOMACH, DISEASES OF 474
Treatment. Herschell 474
SYPHILIS, INFANTILE. Fedtchenko 474
TRIONAL. Habermann 474
TUBERCULOSIS, INFANTILE 474
Diagnosis. Louis Fischer 474
Treatment. Louis Fischer 475
TUBERCULOSIS OF THE MIDDLE EAR. Seymour Oppenheimer 475
TUBERCULOSIS, PULMONARY 476
Treatment. Delancy Rochester 476
UROTROPIN. Wilcox 476
VACCINATION. Lowe, A. D. Griffiths, P. R. Cooper, R. W. Lefwich, Sinclair White 455
VAGINITIS, GONORRHŒAL 476
Treatment. I. L. Polozker 476

Cyclopædia of the Year's Literature.

BOILS (FURUNCULOSIS).

Treatment. — The following method for preventing the formation of boils is recommended by Albert Robin[1]: The patient should be given tar-water as a drink, and should take every day three capsules containing the following:—

℞ Sublimed sulphur, 1.5 grains.
Pulverized camphor, 0.3 grain.—M.

Whenever there is any redness, or there are threatening indications of the

[1] Jour. des Praticiens, Jan. 23, '97.

Digitized by Microsoft®

formation of a boil, the spot should be painted with tincture of iodine, and in this way it may be arrested. When the boil has formed the contents should be evacuated as completely as possible. When the core has been taken out the following ointment is introduced into the wound by means of a brush:—

℞ Sublimed sulphur,
Pulverized camphor, of each, 150 grains.
Glycerin, a sufficient quantity.—M.

The boil is then covered with a piece of linen on which this ointment has been spread.

After this has been applied for twenty-four hours the part should be washed with boric-acid water and atomized with a 1-to-100 solution of carbolic acid, and then the application of the sulphur paste should be repeated.

It is now pretty generally conceded, remarks Skillern,[2] that boils are of microbic origin, the microbe being in all probability the staphylococcus pyogenes aureus of the mycelium.

If seen when forming, the boil may be aborted by painting a ring of iodine around it, and if a hair occupies the centre, plucking it out. When the boil has fully formed (whether the core be present or not) a crossed incision will quickly heal it. If necessary, the parts should be shaved, then cleansed as for any operation, first with soap and water, alcohol, and lastly mercuric bichloride 1 to 1000, then anæsthetized by spraying with ethyl-chloride.

The instruments being aseptic, a crucial incision is made through the centre of the boil, beginning well to one side and carried to the other, going as deep as the cellular tissue. The boil should then be gently pressed to expel as much pus as possible and to allow a free flow of blood. After a sufficient quantity of blood has escaped the wound is wiped out with pure carbolic acid, then dressed with ichthyol ointment 50 per cent. and powdered boric acid.

If the boils have a tendency to come out in crops the internal administration of mercuric bichloride in full doses will arrest their growth.

L. Duncan Bulkley[3] has for ten years and more avoided both the poultice and the knife in the treatment of boils.

His first point is to urge that the occurrence of these suppurative processes should always and more forcibly be regarded as evidences of faulty metabolism, and a more serious search be made to discover and rectify what is wrong.

Patients with boils, carbuncles, and felons are never in perfect health. Iron is most commonly needed, but quite as often there will be digestive and assimilative difficulties also to be overcome. Sometimes the cause lies only in overwork or worry, often in dissipation, though of a relatively harmless kind, involving late hours and irregular eating.

The combination of iron which the writer has most commonly used in these affections is one which is known as Startin's mixture:—

℞ Ferri sulphatis, 1 drachm.
Magnesiæ sulphatis, 6 drachms.
Acidi sulphurici diluti, 4 drachms.
Syrupi zingiberis, 4 drachms.
Aquæ, ad 3 ounces.

M. Sig.: One teaspoonful in water, through a tube, after meals. Unless there is some counter-indication treatment is to be begun with a good mercurial purge:—

---

[2] Med. and Surg. Reporter, Aug. 7, '97.
[3] British Med. Jour., Oct. 2, '97.

Digitized by Microsoft®

℞ Massæ hydrargyri,
Extracti colocynth. co., of each, 10 grains.
Pulv. ipecac., 2 grains.

M. Div. in pil. No. 4. Take two at night and two on the second night after. These four pills are generally repeated at the end of a week, and perhaps in other successive weeks.

Sulphide of calcium, if a perfectly good and fresh article and properly used, has a very decided controlling effect over the process of suppuration. The writer always gives it in gelatin-coated pills, which he tests himself, for occasionally the drug will be found quite ineffective from having changed to the sulphate of lime or gypsum. To be efficient it should be given freely, $^1/_4$ grain every two hours,—say, eight or ten doses in the day; this in connection with the iron tonic.

With these measures and a most careful attention to the diet and mode of life the tendency to the suppurative process may generally be quickly overcome.

For the local treatment a moderately thick layer of absorbent cotton is used, several times the size of the inflamed surface, with the fibres running the long way. Upon the centre of the cotton a considerable mass of the following ointment is spread by means of a spatula, and this is then laid over the boil and held in place by strips of adhesive plaster across the ends, but not passing over the boil.

The ointment is composed of

℞ Acidi carbolici, 5 to 10 grains.
Ext. ergotæ fld., 2 drachms.
Pulv. amyli, 2 drachms.
Zinci oxidi, 2 drachms.
Unguent. aquæ rosæ, 1 ounce.

M. ft. unguent.

If comfortable and unless disturbed, this dressing remains untouched twelve or more hours, when it is removed and a freshly-spread piece immediately reapplied. If there has been any discharge the surface may be very gently cleansed with absorbent cotton, but the writer does not allow any squeezing. In many instances with proper internal and general treatment the boil absorbs and subsides without discharging.

In furunculosis of the auditory meatus Field[4] thinks that for the relief of pain nothing is better than glycerin. It acts by relieving tension, and when used should be mixed with an equal quantity of tincture of opium and some boric acid, and applied on a small dossil of cotton.

Burlureaux[5] incises the furuncle, removes the core, and fills the cavity with a powder composed of the following:—

℞ Quick-lime,
Sodium carbonate,
Alum, of each, equal parts.—M.

This kills the pathogenic micrococci and produces rapid healing.

LEUKÆMIA.

Diagnosis.—The differences in metabolism in acute and chronic leukæmia as noted by Magnus-Levy[6] were very striking. In acute cases there was a large amount of urine and notable increase of total nitrogen and uric acid, with increasing excessive excretion of nitrogen up to the end. In chronic leukæmia there was a moderate amount of urine and normal nitrogen, without an excessive exertion before death. An excessive metabolism is characteristic of acute leukæmia; but this is not constant. The author denies a constant relation be-

[4] Brit. Med. Jour., Jan. 1, '98.
[5] Independance Méd., Mar. 23, '98.
[6] Arch. f. Path. Anat., etc., B. 142, H. 1.

Digitized by Microsoft®

tween the number of leucocytes and the excretion of alloxur bodies, but finds these in some cases directly, in others inversely, proportional. On the other hand, he thinks that the constant loss of blood in acute leukæmia increases the albumin-metabolism directly. He also thinks that the sudden diminution in oxidation injures the cells and leads to increased break-down.

In acute leukæmia Benda[7] mentions as characteristic the hæmorrhages into the tissues and the regional adenopathies. The splenic tumor differs from that of acute infectious diseases in being less soft and not so large. A peculiar lesion of veins is also constantly observed. The chief blood-change is an increase of uninuclear elements.

A. Fraenkel[8] thinks a characteristic of acute leukæmia is the hæmorrhagic diathesis which is associated with swelling of the glands, spleen, and liver, and with peculiar blood-changes. He has seen twelve cases in seven years. Many cases were mistaken for purpura hæmorrhagica until the blood-examination revealed their true nature. Typical heteroplastic leukæmic growths occur in the liver and spleen. The blood-changes are entirely characteristic. There is a remarkable increase of the mononuclear elements, which are of the most varying sizes, but they do not contain any neutrophilic granules.

Etiology. — L. Pollmann[9] reports a case of pronounced leukæmia in an infant born of healthy parents without syphilitic antecedents. On account of the verrucous endocarditis found at the necropsy the nineteenth day after birth, he is inclined to ascribe the origin of the leukæmia to some infective process which affected the mother during her pregnancy, but which remained latent as far as she was concerned.

Pathology.—Nonne[10] contributes two cases of cord disease from leukæmia.

The first case was that of a 59-year-old man. The disease began six months before death. Two months after the inception of the disease the liver and spleen were found to be greatly enlarged, the red blood-corpuscles numbered 1,896,000, the white 630,000, to the cubic millimetre, and the percentage of hæmoglobin was only 40. Glandular enlargement was limited to a few glands in the groin and axillæ, some of which were as large as a filbert. While under observation the number of red blood-corpuscles increased slightly, and the spleen diminished in size, but the patient suffered from large intermuscular hæmorrhages, and died of marasmus and catarrhal pneumonia. Microscopical examination of the cord revealed small myelitic foci or, more strictly speaking, foci of acute or subacute nerve-degeneration, scattered through the white substance from the upper lumbar region to the medulla oblongata. Some of these degenerated points were large enough to be seen by the naked eye, and all stages of degeneration were to be observed, from a simple puffed-up appearance of the myelin sheath and swelling of the axis-cylinder, to segmentation, breaking up and disappearance of the nerve-fibres, with compensatory hypertrophy of the neuroglia. Changes in the vessels, hæmorrhages, cellular infiltration, and extravasation of leucocytes were entirely wanting, and the gray matter throughout, together with the nerve-roots, was absolutely normal.

The second patient, a 31-year-old man, noticed first some enlargement of the abdomen, and during the next two months

[7] Centralb. f. innere Med., June 26, '97.
[8] Deutsche med. Woch., July 1, '97.
[9] Münch. med. Woch., July 1, '97.
[10] Deutsche Zeitschrift f. Nerv., Apr. 30, '97.

Digitized by Microsoft®

marked general weakness developed. Patient was found to have an enormous spleen, reaching to the right inguinal region. The lymphatic glands were not enlarged. Examination of the blood showed a great increase of white corpuscles, viz.: 1,940,000 red and 910,000 white to the cubic millimetre. Objective symptoms of involvement of the nervous system were wanting. The patient died four months after the appearance of the first symptoms noticed. Careful microscopical examination of the spinal cord revealed lesions identical in character, size, and distribution with those of the first case, the gray matter, nerve-roots, and vessels being intact.

Changes in the larynx and in the trachea in cases of leukæmia as seen by Otto Barnick[11] in a case of a boy aged 13 years. He had attacks of severe dyspnœa, with croupy cough. Laryngoscopical inspection revealed great thickening of the ventricular bands, and infiltration of the whole upper portion of the larynx. The child died with severe dyspnœa, aphonia, and bleeding from the mouth and nose. On post-mortem examination it was found that the infiltration of the larynx and bands was due to a dense collection of lymphocytes in the submucous tissue. The capillaries, also, were distended with lymphocytes, and these cells were especially abundant in the interglandular spaces. The submucous tissue in the trachea was affected in the same way.

LUPUS.

William Anderson,[12] after an experience of excision during the past fifteen years, gives it as his opinion that, if carried out in the light of modern science in suitable cases, it should be not a final resort, but both the alpha and the omega of the surgeon. For patches not exceeding a crown piece in size he has found excision by far the most successful, the most speedy, the most thorough, and in its results the most permanent and sightly of all plans. If small and conveniently situated, the wound may be closed immediately by suture, leaving a linear cicatrix; if large, or otherwise unsuitable for closure, it may be covered either immediately or after a short interval with an epidermic graft, and the healing process in any case is concluded within a period of two or three weeks. On the neck, limbs, and trunk, and occasionally on the face, the raw surface may be covered in partially or completely by gliding portions of detached integument from an adjacent part, or other resources of plastic surgery may be employed.

The writer has removed at a single sitting as many as thirty-five different patches. The line of incision is placed (where possible) a third to a half inch from the most rapidly spreading edge, but may approach to within a quarter inch of the more quiescent parts of the border. On the trunk or limbs the section may be carried down to the deep fascia if the subcutaneous tissue is scanty, or well into a thick layer of fat. On the face the muscles and branches of the facial nerve must be left unexposed, and the depth within these limits must be adjusted to the degree of infiltration of the tissues by the new growth, taking care to remove the whole of the disease and a certain portion of the apparently healthy structure beneath.

MENINGITIS.

Symptoms.—J. W. Carr[13] recognizes a distinct form of meningitis, occurring

[11] Münch. med. Woch., Apr. 19, '98.
[12] St. Thomas's Hospital Reports, vol. xxv, '97.
[13] Medical Week, Apr. 16, '97.

Digitized by Microsoft®

almost exclusively in infants, which has not at present received adequate recognition. Description of this disease is based upon eleven cases. All the cases occurred in previously-healthy infants under a year old.

The onset is gradual in some, sudden in others; but in all the most constant and characteristic symptoms are severe vomiting, extreme head-retraction, and stupor,—passing into coma, of remarkably long duration, generally several weeks, — the excessive head-retraction persisting to the last.

The cases reported all terminated fatally, none in less than five weeks, while some children lived for three months or even longer. At the autopsies inflammation of the pia and arachnoid was found over a very definite area at the basis of the brain, hydrocephalus in all the cases, and, in some, closure of the openings between the fourth ventricle and the subarachnoid space. In no instance was any sign of tubercular disease discovered, either in the cranial cavity or elsewhere.

A. E. Davis[14] states that many of the eye-symptoms of importance in meningitis are largely motor, which may be observed without the aid of the ophthalmoscope. Thirty-eight cases of meningitis were reported: 13 simple leptomeningitis, 12 cerebro-spinal meningitis, 13 tuberculous. In 8 of the 13 cases of leptomeningitis there were no eye-symptoms. The patient with purulent meningitis, in which no eye-symptoms were present, showed post-mortem the meninges covered with pus and extensive adhesions between pia and dura mater. In the cases of cerebro-spinal meningitis eye-symptoms were absent in 7. Loss of iris-reflex was present in one, dilated and fixed pupils in another, strabismus in a third, and in the fourth the pupils were dilated, but reacted to light. No eye-symptoms were present in 8 of those having tuberculous meningitis. Cerebro-spinal meningitis has as prominent symptoms paralysis of third, fourth, ophthalmic division of fifth, sixth, and seventh nerves, with nystagmus and ptosis from cortical lesions; choked disk, optic neuritis, perineuritis, plastic and suppurative iritis; œdema of the lids; conjunctivitis, hemianopsia as a cortex or tract lesion. In simple or leptomeningitis the eye-symptoms are of more importance in determining the diagnosis than in the cerebro-spinal type. The most reliable is optic neuritis.

Diagnosis.—In lumbar puncture as a means of diagnosis in epidemic cerebro-spinal meningitis Williams[15] states that a small trocar of some strength should be used, and should be inserted downward and inward at a point slightly lower than the lowest point of the spinous process of the second lumbar vertebra, and one inch outside. It should penetrate to a depth of rather more than two inches. These measurements are, of course, for adults. The pus is often thick and flows with difficulty.

Case of tubercular meningitis followed by recovery after lumbar puncture was observed by William L. Stowell.[16] The diagnosis of tubercular meningitis was made, lumbar puncture was performed, and about ten cubic centimetres of clear fluid were slowly withdrawn. Tubercle bacilli were found, thus establishing the diagnosis.

Stoelzner[17] reports a case of epidemic cerebro-spinal meningitis in a girl, aged 2 1/2 years, terminating in recovery at

---

[14] Medical News, June 5, '97.
[15] Boston Med. and Surg. Jour., Sept., '97.
[16] Pediatrics, vol. iv, p. 415.
[17] Berliner klin. Woch., No. 16, S. 333, '97.

Digitized by Microsoft®

the end of thirty-four days. Lumbar puncture was made and the cerebro-spinal fluid gave a pure culture of the intracellular meningococcus (Weichselbaum-Jaeger), which, according to the researches of Heubner, should be considered the specific cause of epidemic cerebro-spinal meningitis.

Etiology. — Wolf[18] thinks that the pneumococcus and meningococcus are the chief producers of cerebro-spinal meningitis, and that other micro-organisms, especially the pyogenic cocci, play the causative part in only a few cases. In circumscribed meningitis the pneumococcus has, up to the present, alone been found. A general infection by way of the blood must be distinguished from a local infection arising from some region in the neighborhood of the skull. One of the most frequent modes of infection is that the micro-organisms gain access from the naso-pharynx through the Eustachian tube into the middle ear, and thence into the cranial cavity.

Lapersonne[19] describes a case of wound of the eyeball which became septic and after enucleation death ensued from meningitis ten days after the operation. Bacteriological examination of the purulent exudation demonstrated the presence of the diplococcus pneumoniæ.

G. F. Still,[20] as the results of his investigations into the etiology of the simple posterior basic meningitis of infants, arrives at the following conclusions:—

1. The disease of infancy, recently described as simple or non-tuberculous posterior basic meningitis, is a specific disease, due always and only to a particular micro-organism.

2. The micro-organism which is the cause of this disease is a diplococcus, which is almost identical with the diplococcus described by Weichselbaum and Jaeger. It presents, however, some slight differences, which are probably to be accounted for by natural variation.

3. The simple posterior basic meningitis of infants must, on bacteriological evidence, be considered as a sporadic form of the disease known as epidemic cerebro-spinal meningitis, the bacillus intracellularis having been shown by recent observers to be the cause of some, at least, of the epidemics of that disease.

4. The periarthritis, which occasionally complicates the simple posterior basic meningitis of infants, is due to the same diplococcus that is found in the meningeal exudation.

Pathology. — In epidemic cerebro-spinal meningitis Lewellys F. Barker[21] describes two kinds of alteration in the cells of the spinal cord:—

First, slight changes in the cells of the anterior horns, such as occur from various poisons and which he attributes to the toxæmia of the disease, viz : (1) the disappearance of the stainable substance of Nissi from dendrites or from portions of the dendrite or of a cell-body; (2) the formation of nodular swellings of the dendrites, these swellings corresponding to pathological accumulations of the stainable substance; and (3) a tendency to disorganization of individual Nissi bodies, especially at the periphery of the cell.

Second, lesions not all similar to the first, but practically identical with those which take place in the cell-body of a neuron after an injury of the axon which belongs to it. These latter changes were found in the cells of the anterior horns and in those of Clarke's columns.

---

[18] Berliner klin. Woch., Mar. 8, '97.
[19] L'Echo Méd. du Nord, May 9, '97.
[20] Jour. of Path. and Bact., May, '98.
[21] British Med. Jour., Dec. 25, '97.

Digitized by Microsoft®

Treatment.—Dinami[22] has employed with success the method of Daxio in treating meningitis with hypodermic and intravenous injections of mercuric chloride.

NEURALGIA.

Symptoms.—Osler[23] refers to the numerous cases of paræsthetic neuralgia recently recorded by Roth and others, in which there is gradual development of burning pain and uneasy feelings and sometimes anæsthesia in the antero-lateral portion of one thigh. The pain may be sufficient to prevent walking. The condition has been thought to be due to compression of the external cutaneous nerve either by the psoas muscle or otherwise. The writer records three somewhat similar cases where there was monocrural paræsthesia. In each case the physical examination was negative. The duration of the affection varied in these cases from one month to eight years.

Oppenheim[24] thinks that brachial neuralgia is a rare disease, and that it is frequently only a symptom of an organic or functional disease of the central nervous system or of genuine neuritis. It most often consists in pain in the arm of ill-defined character and localization of a pain of psychic or neurasthenic origin, rather than that of a genuine neuralgia.

According to W. H. Brown[25] cyclists cannot be too particular as to the kind of saddle, as he had several cases where an ill-fitting saddle exerted an injurious pressure upon the nerves of the perineum. The female patients complained of excruciating pain at the anus and the skin around it. Among the male patients he noted scrotal and testicular pain, with hyperæsthesia of the skin of the scrotum and of the inner sides of both thighs; retention of urine; extravasation of blood beneath the skin of the perineum, and one case complained that after two hours' ordinary riding his penis became so insensitive that he could pinch the skin hard and feel no pain, while the glans had lost their normal sensations.

Phrenic Neuralgia.—Diagnosis.—In phrenic neuralgia Jousset[26] insists upon the existence of a constant painful point situated precisely in the median line of the sternum, at the level of the fourth or fifth chondro-sternal articulation. It should not be confounded with the diffuse retrosternal pain observed in chronic affections of the aorta.

Treatment.—In 126 cases of aortic aneurism Levacher[27] has noted the occurrence during the last eleven years of cervico-occipital neuralgia in twenty-nine cases. The caution he points has a bearing upon treatment, inasmuch as powerful tonics given for the relief of a neural condition assumed to be in great measure asthenic, may injuriously affect the aneurism which is the real cause of the neuralgic symptom by unduly increasing the force of the heart. Such mistaken treatment may even promote a fatal issue.

Krause[28] says that in three very severe cases of trigeminal neuralgia he has had excellent results from aconitine nitrate (Merck). This powerful remedy must be administered with caution. Its maximum dose is $^1/_{128}$ grain. He prescribes a 1-to-1000 aqueous solution ($^2/_5$ grain in 6 $^1/_4$ drachms), and of this he gives

---

[22] La Pediatria, Nov., '97.
[23] Jour. of Nerv. and Mental Dis., Mar., '97.
[24] Berliner klin. Woch., June 27, '98.
[25] British Med. Jour., May 16, '98.
[26] Jour. des Pract., Aug. 7, '97.
[27] La Semaine Méd., p. 355, Sept., '97.
[28] Centralb. f. d. ges. Therapie, pp. 223-225, Apr., '98.

Digitized by Microsoft®

1 drop every hour for ten hours in succession for the first day, 2 drops every hour the second, etc., until on the sixth day 6 drops every hour for ten consecutive hours are given. At this dose he usually stops. When absolutely no bad by-effects are noticed (such as inclination to vomiting, crawling in the fingers, numbness of the tongue), he sometimes increases the dose to 8 drops ten times a day. The remedy is continued for several weeks.

Krauss,[29] having succeeded admirably with nitroglycerin in sciatica, determined to try it in tic douloureux. He was called to see a lady who had been for a long time suffering from trigeminal neuralgia so severely that removal of the Gasserian ganglion was contemplated. He prescribed tablets of $^1/_{100}$ grain of nitroglycerin, at first thrice daily, gradually increased until the patient was taking 7 or 8 tablets daily, and, if necessary, 1 every hour. The face was also treated with a mild galvanic current, and she was given a laxative tonic. She began to improve after the second week, and the improvement steadily continued.

The dose of nitroglycerin should be increased until the physiological effects are produced, even if enormous quantities must be administered.

Walsh[30] states that Eulenberg has used permanganic acid in some thirty cases of obstinate neuralgia. While it does not always give relief, it often gives marvelous results, and should be tried before resorting to operation. It must be injected directly into the substance of the nerve, and this causes considerable pain for a time. Frank observed two cases of facial neuralgia that had become so unbearable that there was question of operative interference. In one case a single Pravaz syringeful, in the other two such injections of a 1-per-cent. solution of permanganic acid, gave complete relief, lasting now for more than a year in each case.

To relieve neuralgia of phthisical patients Capitan[31] prescribes the following ointment. A very small quantity is lightly applied, and the part covered with some impermeable material and absorbent cotton. The application must be discontinued as soon as the skin becomes even slightly reddened:—

℞ Guaiacol,
Methyl-salicylate, of each, 80 grains.
Ext. of belladonna, 3 $^1/_2$ grains.
Ext. of opium, 4 grains.
Vaselin,
Lanolin, of each, $^1/_2$ ounce.
M. Sig.: External use.

In very acute cases, menthol (15 grains), antipyrine (30 to 45 grains), or bromide of potassium (80 grains) may be added.

Marchant and Herbet[32] state that some forms of obstinate facial neuralgia have for origin a Gasserian lesion, and that the only treatment of this lesion, which is held to be one of inflammatory nature, is destruction of the ganglion. In instances in which there is no appreciable lesion of the ganglion, and, notwithstanding this, expiration has been followed by cessation of the neuralgia, the cure may be explained by destruction of this nerve-centre, which includes the nerve-cells, the mere extensions of which are suppressed in simple extracranial section. The temporo-sphenoidal method is the most effectual one of reaching the ganglion.

---

[29] Buffalo Med. Jour., p. 169, Oct., '97.
[30] Therap. Gaz., Feb. 15, '98.
[31] Med. News, July 9, '98.
[32] Rev. de Chir., Apr., '97.

Digitized by Microsoft®

Relapse of the neuralgia occurs much less frequently after destruction of the ganglion than after resection of the main branches. Hitherto the results of complete extirpation have not, however, been superior to those of simple destruction of the ganglion. Of 95 recorded cases of operation 17 proved fatal, the mortality of the temporal method (Hartley-Krause and Doyen) having been about 12 $^1/_2$ per cent., and that of Rose's method about 20 $^1/_2$ per cent. There has been no difference in the rates of mortality attending complete and incomplete extirpation of the ganglion.

PNEUMONIA IN CHILDREN.

Symptoms.—Schlesinger[33] states that mobility croupous pneumonia occurs most frequently at the fourth year. In the younger cases boys are attacked about twice as frequently as girls. The sick are usually of strong constitution.

Fever occurs, either without any prodromes, in about ten hours, or by slight prodromes lasting one or two days, in about three or four hours. The younger the child, the higher the fever and the more frequently the fever is remittent or intermittent.

Pneumonia of the apex usually has a more severe fever than that of the lower lobes. Lysis is less common than in adults.

During the course of the disease fever, temperature, and pulse are parallel. In crisis fever and pulse fall together, the respiration more slowly.

The exudate does not limit itself so strictly to the single lobe affected as it does in adults, but the borders of the neighboring lobes are likewise affected. The pneumonia usually develops without marked initial symptoms. Chill is much less frequent than in adults, and vomiting is much more common. Immediately before the crisis the chill is frequently worse than usual.

Pneumonia migrans is the most fatal form in children. A relapse is very infrequent. There is always a leucocytosis in the height of the pneumonia. The number of red cells is lessened after the crisis. Bronchitis is a frequent complication in the beginning. Pleurisy is the most frequent complication, usually recovers, and seldom becomes purulent. Middle-ear disease is frequent, and is especially frequent in the first three years of age and with right-sided pneumonia.

Aufrecht[34] makes a sharp distinction between croupous or lobar and catarrhal or lobular pneumonia. The former is an ascending pneumonia, while the catarrhal form consists of different foci. He divides catarrhal pneumonia into three groups:—

1. A primary one in older children not suffering from any exanthematous disease.

2. That following infectious diseases accompanied by inflammation of mucous membranes.

3. The third group is met with in cachectic children, due to bad air, poor food, and in rhachitis of the thorax.

In the first group we encounter high fever, in the second a long-continued fever, and in the third fever is absent.

We occasionally elicit dullness over both lower lobes of the lungs in pneumonia, accompanied by bronchial breathing in the upper lobe, and this happens in catarrhal pneumonia, which might therefore easily be taken for tuberculosis. In severe disease of the lower lobes, the upper do not expand well, so that quiescent air-columns are formed.

---

[33] Archiv f. Kinderheilk., vol. xxii, Parts III to VI.

[34] Der Kinderarzt, viii, 220, '97.

Digitized by Microsoft®

Etiology.—As a result of forty-one autopsies recently on children having primary and secondary pneumonia, H. Dürck[35] found a more or less complicated mixture of bacteria, among which the diplococcus pneumoniæ was most often present. An histological division between lobular or pseudolobular pneumonia and lobar pneumonia cannot be carried out. The term "broncho-pneumonia" is justified only when the inflammation has been proved to travel from the terminal bronchi into the peribronchial tissue. In thirteen autopsies of children who died from other causes and whose lungs were normal, the writer always found bacteria; here, too, the diplococcus pneumoniæ was most frequent. That the presence of bacteria in these normal lungs was not due to post-mortem infection, the writer proves by his discovery of the same bacteria in the lungs of domestic animals but recently killed and dissected. The writer concludes from this that the presence alone of bacteria in the lungs—which bacteria are present in the lungs of every healthy person—is not sufficient to cause pneumonia, but the organs must in some manner first undergo harm and damage. This he proves by experimental research.

Treatment.—In the management of hyperpyrexia, H. D. Chapin[36] says, the first point is to avoid any measures that will secondarily have a bad effect, and thus hinder future chances of recovery. All depressing remedies come under this head: as, for example, most of the coal-tar derivatives. The only exception is the occasional administration of small doses of phenacetin in sthenic cases where there is pain and nervous restlessness. Cardiac stimulants, such as caffeine or camphor, are always added. Where very high temperature keeps recurring, however, this remedy is not to be continued. The application of water is, on the whole, the safest and most satisfactory method of controlling dangerous hyperpyrexia. Much may be accomplished by a thorough application of cold to the head. In order to be effectual the cold to the head must be thoroughly and continuously applied. Finely-cracked ice placed in bladders, from which the surplus air is expelled, may be molded around the head, especially at the vertex and occiput. Ice-poultices made by mixing finely-cracked ice with flaxseed-meal in oiled silk, placed around and on top of the head is most valuable. By this means a steady application of cold can be conveniently applied. If this is not accomplished, the next resource is the application of compresses directly to the chest. The child is stripped, wrapped in a blanket, and placed upon a table. A stimulant is given and the feet are placed in contact with hot bottles. A compress sufficiently large to surround the chest is plunged into water at a temperature of from 70° to 95° F., and applied to the chest. This is changed every ten or fifteen minutes until the desired result is obtained. In order to disturb the child as little as possible, the nurse is directed to apply the compress from the front, tucking in the ends until they meet in the back. The exact temperature of the water in a given case must be determined by the condition of the child and the temperature to be combated. A needless amount of cold is often employed. The addition of about one-fourth part of alcohol sometimes increases the value of these compresses. So long as the feet and hands are kept warm the cool compresses may be applied, but

[35] Deutsches Archiv f. klin. Med., B. 58, H. 4 and 5.

[36] Med. News, Nov. 19, '98.

Digitized by Microsoft®

chilliness of these parts is a contra-indication of cold. When the temperature is reduced to 102° or 103° F., the compresses should not be renewed, but are kept in position in case the temperature ascends again to an unsafe degree. In case of cyanotic children, with prostration and hyperpyrexia, the warm bath (100° F.) with friction of the surface has been applied with good results.

In children under 3 years, Simon Baruch[37] regards the tub-bath, with continuous friction, as most useful. If the body-temperature is between 101° and 103° F. a tub is placed upon two chairs, near the bed; it is half filled with water at 95° F. The child's face is now bathed with water at 75° F., and its trunk is gently submerged and held by pressing the fingers upon one shoulder (not upon the chest). Ice-water is now added, without being allowed to touch the child's body, until 85° F. is reached; friction over the entire body is maintained for five minutes.

This is a good initiatory procedure; it may be repeated every four to six hours with advantage so long as the temperature does not fall below 101° F. When the body-temperature is above 103° F. the bath-water may be reduced to 80° F., very rarely lower. The duration should be prolonged to eight minutes; in this event it requires repetition every four hours. In the intervals between the baths a compress, covering the entire anterior part of the trunk, consisting of three folds of old linen or a towel (without fringes) wrung more or less out of water at 70° F., and secured by a flannel bandage placed around the body, may be applied with advantage every hour when the patient is not asleep. This procedure renders the demand for bathing less frequent. When delirium and stupor are present, when cyanosis is pronounced, and cardiac action embarrassed, when the bronchi are clogged with secretions, and increasing dyspnœa,—in these conditions the full bath may be changed to dips into water at 80° F. or less for a few seconds, repeated two or three times in rapid succession every hour, the temperature, duration, and frequency being in accord with existing conditions. An excellent procedure in these desperate cases is the affusion with basins of water at 60° F. or less poured over the head and shoulders of the patient, who is held semirecumbent in a tub containing water at 100° F. Rapid drying and friction are demanded after these procedures. Body-temperature is not an index for the cold affusion, which should be given in these desperate cases even if the temperature is low.

In most children over three years of age full baths are too disturbing.

In most children about three years of age the chest-compress, consisting of three folds of old linen so arranged by slits in the axillary portion as to fit snugly around the chest down to the navel and held in position by a flannel binder, is the most useful procedure. The linen is wrung out of water at 65° to 70° F., more or less thoroughly, according to the temperature and general condition, and the flannel bandage is pinned over it. (Oiled silk, which the nurse will recommend for protection of the bed, counteracts the object of this compress and converts it into a poultice.) It is repeated every hour and discontinued when the temperature reaches 100° F.

Spontaneous reaction must always be provided for by friction during the bath so that there should be no need for warmth and friction after the bath.

---

[37] Med. News, Nov. 19, '98.

Digitized by Microsoft®

Whenever the patient becomes very chilly, with chattering teeth and cyanosed face, we may conclude that the procedure has been faulty and must be modified.

According to L. Emmett Holt,[38] the most important things to be considered are: (1) an abundance of fresh air; (2) intelligent nursing; (3) careful feeding. Under no circumstances should less than 1000 cubic feet be allowed to each hospital patient. Rooms kept close and suffocating at a temperature of 75° F. and upward, on account of the fear of draughts, are to be reckoned among the most depressing agencies to a child with pneumonia that can be imagined.

No less important than this is the constant, unremitting, intelligent care which is included under the term of good nursing; not to worry the child and wear it out by doing too much, quieting its nervous system by frequently changing its position in its crib and changing from the crib to the nurse's lap or shoulder, and ministering to its physical comfort in the thousand and one little ways which an experienced infant's nurse knows how to do. Plenty of water is always important and is best given by combining it with the food, together with the use of predigested milk and beef preparations, or other foods which are easier assimilated and tax digestion as little as possible. The cough has been better controlled by the inhalations of the vapor of such substances as creasote, eucalyptol, and pineneedle-oil under a tent than by the administration of drugs by the mouth. Some stimulation is required in nearly all cases, and sometimes wine, sometimes brandy, or whisky is better borne. Both should be very freely diluted and rarely pushed beyond 1 ounce of whisky or 3 or 4 ounces of light wine in twenty-four hours. The temperature is rarely high enough in these cases to require anything more than sponging or an ice-cap to the head. Moderate counter-irritation, especially early in the disease, is usually maintained by the use of a mustard-paste every three to six hours, left on from five to six minutes; and an oil-silk jacket is worn throughout the attack. The rule should be followed of not giving the child a single dose of medicine unless absolutely demanded.

Cardiac and respiratory stimulants are often necessary within twelve hours of the onset and invariably before the end of the second day. Those stimulants on which we most rely, placed in the order of their value according to our judgment, are: (1) strychnine, (2) nitroglycerin, (3) oxygen, (4) alcohol, (5) caffeine. Of strychnine we rarely for a child of 1 year give more than $^1/_{200}$ grain every three hours, except for a very short time, and it must sometimes be omitted altogether when there is great restlessness and cerebral excitement. For a short time $^1/_{400}$ grain of nitroglycerin may be given every hour, and after two or three doses continued at four- or five-hour intervals.

Hyperpyrexia is best controlled by the cold-pack, all clothing but the napkin being removed. The child is laid upon a blanket, then rolled in a wet sheet, and afterward rubbed with ice over the trunk. The blanket is then brought together and pinned beneath the chin without removing the wet sheet. The ice is reapplied every one-half hour or two hours, according to the symptoms. The wet pack may be continued for two or three days at a time. A hot-water bag should always be kept at the feet.

Hot mustard-baths should be given at a temperature of 105° to 106° F., this

[38] Med. News, Nov. 19, '98.

Digitized by Microsoft®

being tested by a thermometer and continued from ten to twenty minutes. They may be repeated every five or six hours.

F. M. Crandall[39] thinks that the ordinary vigorous child who contracts pneumonia is more likely to recover than he is to die. As little medicine as possible should be given in these cases, and many recover when none is given. The diet is the principal thing. Food at regular intervals should be prescribed and its administration insisted upon.

In treating pneumonia in hospital practice the writer relies upon inhalation of steam under a tent, and upon mustard-paste. The latter is of great service, but should not be left on too long.

W. P. Northrup[40] says that little treatment is necessary in most cases; but, whatever is done, a child with a temperature of 104° or 105° F., and respiration at 60°, should not have a hot poultice tightly wrapped about its chest. Particular attention should be paid to the condition of the digestion and the diet. Fresh air is also an essential. The restlessness and nervous symptoms should be relieved by the cold pack, care being taken to keep the extremities warm by means of hot bottles.

Berg[41] believes that the oil-jacket and poultice should be avoided in the treatment of pneumonia. Sulphate of quinine, given in small doses, and in powder with sugar of milk is of great utility in broncho-pneumonia.

PSEUDOLEUKÆMIA (HODGKIN'S DISEASE).

Symptoms.—F. H. Edgeworth[42] observed a case of Hodgkin's disease in a patient 17 years of age who had been ill only seven weeks. The lymph-glands in the neck, axillæ, and groins were enlarged, as were also the spleen, which extended two inches below the level of the umbilicus and the liver. The interesting feature was the occurrence of a bilirubin jaundice, not hitherto described in this complaint. This was probably due to blood-destruction from capillary hæmorrhages. This view was supported by the fact that, while the percentage of corpuscles was 38, that of hæmoglobin was 45.

Treatment.—J. D. L. Macalister[43] describes the treatment in a well-marked case of Hodgkin's disease with erratic temperature, varying from normal to 102.5° F. Patient put on the usual arsenical treatment, beginning with 2 minims thrice daily, and gradually increasing the dose until she was taking 7 minims, three times a day, of Fowler's solution; but in spite of this she steadily and rapidly got worse till at the end of five weeks she was a perfect skeleton, profoundly anæmic, sleepless, and the group of glands affected so agglutinated that outlines of single glands were quite obliterated. The spleen was enlarged, temperature was almost constantly about 100°, and her digestion failed completely. The case seemed rapidly moving toward a fatal termination.

Although bone-marrow tabloids had previously been tried in a case of the same disease in an adult, without the smallest benefit, they were used in this case, beginning with 1 thrice daily. By the third day vomiting and diarrhœa had ceased and the temperature was normal. This improvement steadily continued. The number of tabloids taken was gradually increased, till at the end of a fortnight she was taking 6 in the day. After two months she was apparently in good

[39] Med. News, Nov. 19, '98.
[40] *Ibid.*
[41] *Ibid.*
[42] Bristol Med.-Chir. Jour., Mar., '98.
[43] British Med. Jour., Nov. 13, '97.

Digitized by Microsoft®

health, although the submaxillary and one of the cervical glands were still large. The tabloids were finally stopped. A fortnight afterward she was once more somewhat anæmic, and with the glands, which had subsided to normal, appreciably enlarged. The tabloids were resumed, 3 a day; she is now a plump, healthy child; but she still presents slight enlargement of the submaxillary and one cervical gland.

VACCINATION.

Lowe[44] believes that vaccination can be effected without producing a mark. The marks are a palpable proof that the operation has been non-antiseptic. To prevent a vesicle that is fully formed from going on to the formation of pus, he applies, by means of a fine camel's hair brush, a solution of pure carbolic acid on the seventh or eighth day, the surrounding skin having been previously protected with salad-oil. A few seconds after this application tepid water is poured over the spot and a piece of antiseptic wadding is applied and strapped on lightly. The scab separates without a trace of suppuration, and, therefore, without leaving the faintest cicatrix. It is believed that the protective influence of the vaccine is not in the least diminished by this treatment.

A. D. Griffiths[45] says that after washing the arm with pure Castile soap and warm water and carbolizing the area, vaccination is to be performed with an aseptic needle. After allowing time for drying, a circular piece of cyanide gauze, of sufficient size to cover all the spots and allow a suitable margin, is placed over the marks; over this a layer of absorbent antiseptic wool of the same size is placed, and above this three or four layers of gauze; then a single layer of gauze, large enough to overlap the other parts of the dressing about a quarter of an inch all around, is placed in position and fixed at the margin with flexible collodion. The dressing may need to be applied after seven or eight days.

P. R. Cooper[46] remarks that after thoroughly cleansing the upper part of the affected arm with a weak antiseptic solution (1 in 3000 mercury perchloride) and washing this away with pure boiled water, the arm is to be dried with sterilized wool. The lancet is then sterilized in boiling water or in a spirit-flame and allowed to cool; a tube of calf-lymph is unsealed and a sufficient quantity of the lymph blown on the end of the lancet. Four drops are then placed on the usual sites and the skin incised in four or five places through the lymph-drops. The arm is allowed to dry in the air and the vaccinated area is then covered with a piece of sterilized gauze, a pad of antiseptic sublimate wool placed over this, and the whole secured by a strip of strapping encircling the arm obliquely, and finally by a few turns of calico bandage. The mother is directed to leave the dressing undisturbed and to bring the child on the eighth day, or sooner, if anything seems wrong. On the eighth day the dressing is removed and a similar one reapplied.

Following appliances, according to R. W. Lefwich,[47] found satisfactory in dressing vaccination-wound. Disks of oiled silk kept in absolute alcohol, salicylic wool, mercury-perchloride gauze, a reel of $^1/_2$-inch strapping, a crêpenette bandage ($1\,^1/_2$ inches) and germicidal soap-solution. The arm is first washed and

---

[44] Lancet, Oct. 1, '98.
[45] British Med. Jour., Jan. 1, '98.
[46] *Ibid.*
[47] *Ibid.*, Dec. 11, '97.

Digitized by Microsoft®

dried, and after the scarifications have been made the disks are taken out of the spirit with aseptic forceps and dried upon wool. The blood that has oozed out is wiped off, the lymph blown upon the lancet, spread on the scarifications, and a disk is laid over each. A layer of wool, allowing a good margin, is placed over the disks, a piece of gauze follows, secured by two transverse and one vertical strip of plaster, and the whole is covered with two or three turns of the bandage. At the end of a week the arm is examined, and if necessary the vesicles are pricked. The dressing is then removed, minus the disks, and is directed to be left untouched for another week.

Sinclair White[48] recommends that the child's arm be first sterilized for some distance around the vaccine-site, and, after introducing the lymph, the skin be covered over and around the parts with hot boric gelatin, which rapidly sets into a transparent film, through which the progress of the vesicles can be observed. On the eighth day the film is quite easily peeled off; the vesicles are then dusted over with boric-acid powder, after which another and thicker layer of the gelatin is applied, and while setting daubed with cotton-wool. Occasionally the contents of the vesicles ooze through the film of gelatin, necessitating a second dusting of boric powder.

[48] British Med. Jour., Jan. 1, '98.

Editorial.

THE PATENTING OF ANTITOXIN *VERSUS* THE AMERICAN PROFESSION.

The year's literature, we are sorry to say, has added the name of Professor Behring to the list of those who, in pursuit of knowledge, are only animated by sordid motives. The sentence of the profession had hardly been published broadcast before Professor Behring had himself sanctioned it by the admission that he was no longer a practitioner of medicine—no longer a member of that fraternity which had already accorded him so much honor. We can therefore but place the sentence on record, and recognize that we are now dealing with Mr. Behring, a partner in the firm known as the Höhster Farbwerke.

It seems to us that an important question has been overlooked in connection with the patenting of the diphtheria serum, namely: the improbability of Mr. Behring's success in his business venture. Has he any reason to hope that through the legal shackles placed upon the physicians of this country he is going to profit; or has he by his doings compromised the success which inevitably would have attended a less aggressive policy? Before giving our views, we will reproduce a few abstracts, picked at random from a large number of articles representing journals from all parts of the country:—

"Until recently Behring belonged to that noble band of chosen spirits whose names are handed from generation to generation as the benefactors of mankind. What is he to-day? With sorrow we answer: the cheap and mercenary monopolist who tarnishes for money the luster of his scientific fame; . . . . . the Esau of German science who flings away for a beggarly mess of pottage his claim to a

Digitized by Microsoft®

glorious immortality and an ethical standing which, though it cannot be weighed or measured or gauged, or expressed in dollars and cents, should be as precious to its possessor as a woman's chastity or a man's honor; nay, more—and mark this well—the greedy and unscrupulous appropriator of other men's researches." (Bull. of Pharmacy, p. 337, Aug., '98).

"The granting of a patent upon the antitoxin of diphtheria by the United States Patent-office to Emil Behring has very justly aroused the indignation of every right-thinking physician in the United States. Not alone have the medical journals of this country condemned in no mistaken language this act of our patent-office, but many of the leading foreign medical journals have expressed their surprise and disapproval." (Dietetic and Hygienic Gazette, Nov., '98).

"Had equal commercialism governed Jenner, how many thousands of individuals would have died of small-pox, and what would have been the effect upon the universal limitation of the disease to-day had such an ethical error been perpetrated?

"The voice of the medical profession should be raised in no uncertain tone against this outrageous instance of grasping greed. Such greed often overreaches itself, and the profession should remember that the Höhster Farbwerke, who are the active agents in this matter, are dependent in large degree upon the favor of physicians. Are we, as citizens of this great country and members of an equally great profession, to sit quietly by while our scientific birthright is taken from us?" (Therap. Gaz., Aug., '98, p. 526.)

"It is pitiable to think that the laws of the United States make it possible for Behring to profit by the discoveries of his unselfish brother-scientists." (New York Med. Jour., July 30, '98, p. 164).

"Behring has strained the intent of the patent-law in obtaining an instrument for appropriating to his own advantage the disinterested investigations of scientists who supplied the data and even the suggestion he adopted. They gave their results freely to mankind without a thought that the benefits directly derivable would be restricted for the profit of an individual instead of being freely distributed for the relief of sufferers from a deadly disease." (Medical News, July 30, '98, p. 145).

"The Behring patent on diphtheritic antitoxin is not to go unchallenged, and it is an interesting and significant fact that the United States Government, which has granted the patent, has already taken steps to inquire into the basis of the grant for the purpose of determining the scope of the patent, and whether it will interfere with the work which is now being conducted by the Department of Agriculture in the prevention of animal diseases.

"Moreover, the question of priority is by no means settled in favor of Behring. The French Academy was so much in doubt upon this point that it awarded the medal for the discovery to Behring and Roux jointly, while there is doubt in the minds of many students of the subject whether both of these gentlemen were not preceded by a Japanese scientist.

"Existing manufacturers, so far as we can learn, will continue the production and sale of the serum without any interruption, and will put up a good fight on the patent if any effort is made to enforce it. In this they will doubtless have the co-operation of the pharmacists as well as of the medical profession, whose traditions are rudely shocked by the action of Professor Behring in patenting his discovery." (Oil, Paint, and Drug Reporter, Aug. 1 and 8, '98.)

"How long in America would Behring be a leader of medicine after he had publicly patented, for the benefit of his own pocket, the results of the labors of Pasteur, Roux, Fraenkel, Kitasato, Aronson, Tizzoni, Ehrlich, and many others?" (Cleveland Jour. of Med., Aug., '98.)

"This action of the patent-office is universally condemned, and is inexplicable. It is an outrage, and its injurious effects will be far reaching. Any physician who now uses the remedy without Mr. Behring's permission—and without paying what-

Digitized by Microsoft®

ever price for it that his sweet conscience may dictate—is liable to prosecution in the courts of America. The children must die of diphtheria, as heretofore,—Mr. Behring has willed it,—unless the profession of America will pay the ransom." (Texas Med. Jour., Sept., '98.)

"The spirit of Behring's article to his critics is certainly far from admirable. His insinuations and sneers at Americans are undignified and untrue, and may help us to estimate his personal character more accurately." (Phila. Med. Jour., Oct. 1, '98.)

Several leading features are necessary to insure the success of any business venture, especially when a question of patent is involved. In the first place, the good-will of the expected patrons must be secured: judging by the criticisms of the medical and pharmaceutical press, it may safely be said that Behring has alienated the entire profession of the country. In the second place, the confidence of the patrons must be acquired: several of the abstracts given above accuse Behring of having appropriated ideas that were not his own (sixth and seventh point of law scored against the application), and of trying to patent these along with his own discoveries: does he expect that he can obtain the confidence of the profession with such a record? In the third place, to successfully sustain a patent, it must present certain features of novelty: the points of law scored against the application plainly showing these to be absent, the patent is really but a mere eggshell which one encounter before a Court of Justice will most probably crush. When the whole affair is examined it seems impossible to conceive of a worse beginning and worse prospects for any enterprise. Indeed, in the normal order of mercantile matters, the course adopted by Behring should inevitably turn out to be a suicidal one. True, armed with the weapons placed in his hands by the patent-office, he may try to coerce our physicians to use his wares. We would venture to advise Mr. Behring not to play with fire; he has only been scorched so far; he may yet be burned. In fact, we would strongly urge him to either remain just where he is, or, better still, to recede from his unfortunate position, frankly admitting that he has erred.

There is behind all this, however, a question which, elucidated for the benefit of our foreign *confrêres*, might serve in the future to prevent such mistakes as that committed by Behring. The American medical profession is thoroughly misunderstood on the Continent, and especially from the stand-point of professional ethics. Mr. Behring would not have undertaken his suicidal course had he known that in many ways his American colleagues did not view with favor many procedures resorted to by European physicians to this day with perfect equanimity. To protect a surgical instrument or a remedy by a patent is not ethical in the United States; in Europe nothing is thought of it. The strict code of ethics to which all American physicians worthy of the title subscribe has borne considerable influence upon the development of the profession as a whole; the standing thus acquired in all communities gives it a tone that is quite incompatible with the commercialism with which it is so frequently credited. If our European *confrêres* will bear this point in mind they will understand how thoroughly Behring missed his aim when he attempted to utilize the American profession with *his* ideas of propriety as standard.

Digitized by Microsoft®

ALBUMOSURIA.

Case of true albumosuria, illustrating the necessity for always relying upon something beside the nitric-acid test for albumin before arriving at the conclusion that one has to deal with a case of severe albuminuria. Upon using the nitric-acid test for albumin, the inference is at once drawn that there is albumin present. There is a very heavy zone of what is apparently albumin, and it has all the appearance of a zone of coagulated albumin, being distinctly defined on both the upper and lower surfaces. Upon trying the heat-test for albumin with acetic acid (or without it), it is noticed that upon warming the fluid slightly a precipitate is obtained which corresponds to the result obtained with the nitric-acid test, a heavy coagulum being very similar to that obtained with a regular albuminuria. Upon continuing the heat to separate the albumin, as in separating ordinary albumin, it completely disappears, with the exception of a slight turbidity, which is due to a trace of serum-albumin in the urine. This shows the necessity of carrying out the heat-test to the boiling-point, or close to the boiling-point, before deciding as to the presence of albumin. The heavy precipitate will reappear upon cooling, which is one of the peculiarities of albumose. This heat-test will react with either acetic acid or a few drops of nitric acid.

In order to be sure that the substance is albumose, the biuret reaction may be applied, which consists in rendering the urine alkaline with sodic hydrate and adding a few drops of a very dilute solution of sulphate of copper, when one gets the violet color characteristic of the biuret reaction, which responds only with albumose and peptone. There have been only eight or ten cases of true albumosuria reported in literature. One writer has considered it to be due to malignant disease of some of the bones of the trunk, ribs in one instance, and some of the older cases where it has been reported were considered to be cases of osteomalacia. In one case Fitz made the diagnosis of myxœdema. The writer's case is one in which there is some obscure spinal disease. The most prominent symptom is paralysis of the legs, which has reached such an extent that the patient is confined to the bed. There is also enlargement of the liver and a history of probable syphilis. He has chronic nephritis, with large hyaline, granular, and some few waxy casts. Wood (Boston Med. and Surg. Jour., Oct. 27, '98).

APHONIA.

Treatment.—For the relief of aphonia and dysphonia of laryngitis the following is recommended: First, one should mark approximately with a pencil on either side of the neck the point in the thyrohyoid membrane where the internal laryngeal branch of the superior laryngeal, the nerve of sensation to the larynx, passes into the latter organ. Over the points marked with the pencil, chloride of methyl or a spray of rhigolene is to be used to freeze the parts. The relief in most instances is almost instantaneous, and phonation, which was before difficult or painful, can be performed with perfect freedom. The relief thus afforded is of signal advantage to many professionals. In some instances the relief is of short duration only, in which cases freezing must be done again or several times. This same method may be

Digitized by Microsoft®

employed with advantage in neuroses of the larynx, like laryngismus, spastic aphonia, and in the pharyngeal crises of tabes dorsalis. Albert Abrams (Therapeutic Gazette, Nov. 15, '98).

ARTIFICIAL FEEDING OF INFANTS.

Malt-soup highly recommended in the feeding of infants with gastro-intestinal affections. The writer has used it in more than 100 cases. In 74 very young infants the observations were extended over several months. Here the soup was given in bottles in the polyclinic. The hygienic conditions of these infants were very unsatisfactory, and yet the results were good. The development was arrested and severe gastro-intestinal symptoms were present. In 27 of the 74 cases a complete recovery ensued, so that the patients were free from symptoms for many months; 18 infants still under observation were so much improved that they might be looked upon as cured; 13 cases were much improved; in 3 cases there was no improvement. Of the 74 cases 13 died, death being due in 6 cases to intercurrent disease. The results obtained with this malt-soup were much better than those obtained with Gaertner's fat-milk preparation. The malt-soup contained but few bacteria. Thirty-four of the 74 cases were from 3 to 9 months old, and 23 under 3 months. In infants over 3 months with chronic gastro-intestinal affections, this malt-soup should be tried and continued for several months. In younger infants it requires dilution. Gregor (Deut. med. Woch., Oct. 6, '98).

Method of preparing malt-soup: $1\,^1/_2$ ounces of wheaten flour are well mixed up with $^1/_3$ quart of cow's milk and the mixture passed through a sieve. In another vessel 3 ounces of malt extract are dissolved in $^2/_3$ quarts of water at 122° F., and to it are added $2\,^1/_2$ drachms of an 11-per-cent. solution of pot. carb. These two preparations are then mixed and boiled. Keller (Deutsche med. Woch., Sept. 29, '98).

CARIES OF THE TEETH AND DISEASES OF THE STOMACH.

Patients with dental caries are never healthy. The environment is conducive to the production and maintenance of the bacteria, which induce putrefactive decomposition in animal matter. We are justified in deducing from these circumstances that unless the germs which are lodged in the stomach come directly from the air they may be tracked back to the carious teeth. Some of the germs may become incorporated, enter the stomach, and find in it a medium for development, rapidly multiply there, and become a source of trouble. The multiplication of the micro-organisms and of their products induces an hyperæmia and then an hypertrophic condition of the mucous membrane of the stomach, in which, instead of the normal secretion of gastric juice, there is a heavy, viscid, ropy mucus, which is tenacious and clings to the mucous membrane. This mucus fills the mouths of the glands and completely covers the mucous membrane, so that it almost entirely precludes the possibility of anything like normal action. The food itself begins to act as an irritant, because the juices are not able to penetrate into it; and the proteolytic process yields to fermentation and putrefaction. The bulk of undigested food overtaxes the muscle of the stomach by its weight, and causes gastric irritation. Patients with caries always have bad habits of mastication; and mastication is an important factor in the production of stomach disease. Food that passes into the stomach before it is

Digitized by Microsoft®

thoroughly masticated remains as a foreign body in it and is likely to irritate the gastric walls and supply a basis for the culture of micro-organisms, the toxin of which may become the cause of certain pathological conditions. Bacteria, which swarm in decayed teeth, pass with the food into the stomach and set up chronic gastritis. It must also be remembered that not all micro-organisms that excite inflammation are pyogenic, for the lactic-acid micro-organisms form a toxin that causes catarrhal inflammation. Germs which usually produce pus in interstitial tissue do not produce pus when they develop on the mucous membrane, but may simply keep up chronic inflammation. While many of the micro-organisms found in the mouth do not produce pus, they nevertheless induce inflammation, as, *e.g.*, gingivitis marginalis. The same group of micro-organisms may be able to set up a chronic inflammatory process of the stomach. In gastritis these organisms grow in colonies upon the mucosa of the stomach.

Stark even maintains that there is frequent association between caries of the teeth and enlargement of the cervical lymphatic glands. Out of 113 children with enlarged glands examined, several had carious teeth. The glands involved were on the same side as the caries. Anterior glands were enlarged, if the incisors were carious, and the glands at the angle of the jaw enlarged, if the molars were involved. It is questionable whether these cases are tubercular or not. But a carious tooth may be the seat of a primary tubercular focus. And he adds: "I would advise the placing of school-children under the supervision of a competent dentist." Among the predisposing causes of caries is the rapid development of teeth, the deficiency of lime-salt in the body, rachitis, tuberculosis, and syphilis; defective structure, deep fissures and cavities in the enamel, imperfections in the dentine, irregular position of the teeth leading to the improper retention of food, and not the least important is the fact that certain diseases give rise to an acid reaction in the mouth.

Treatment.—The treatment of dental caries is purely operative; it consists in the thorough removal of the diseased tissue. The cavity is treated with an antiseptic, and material is inserted which shall thoroughly exclude germs.

In acute fevers the most scrupulous cleanliness of the mouth and teeth should be observed, because the salivary secretion under such conditions is of a small quantity only, and is not capable of even approximately neutralizing the acids which are formed. Charles D. Aaron (Charlotte Med. Jour., Oct., '98).

CHOREA.

Treatment.—The first matter of importance in the cure of chorea consists in keeping the child in bed.

The drugs which have been found most useful are antipyrine and arsenic, the first in early stages and acute disease, the latter in later stages and chronic or recurrent cases.

The efficiency of treatment by arsenic is often marred by insufficiency of dose. Two or three drops of Fowler's solution may answer in a few mild cases, but in the majority it is insufficient, and the dose must be increased to 10 or even 15 drops in the course of ten days or a fortnight if the symptoms do not decline.

In all cases a liberal diet is required without stimulants.

The principal complications are endo- or peri- carditis, which in the acute stage are best treated with salicylates, as in rheumatism.

Digitized by Microsoft®

In a few cases in which the actual movements are so violent and continuous as to bring about contusion and abrasion of skin, with exhaustion, wasting, and loss of sleep, direct sedatives are required. Chloral and the bromides are then generally serviceable, the dose being daily increased from 10 to 20 grains. When the active phase of the disease declines, the best tonics are the milder preparations of iron, either the wine or citrate, with liquor arsenicalis in comparatively small doses (3 to 5 minims) or codliver-oil; absence from competition with others, either in school or playground, for some months, which are best spent at the seaside or in the country. W. Essex Wynter (Treatment, Nov. 10, '98).

CIRRHOSIS, ATROPHIC, OF LIVER.

Treatment.—When atrophic cirrhosis of the liver is attended with ascites, the latter may be relieved by the establishment of a collateral circulation for the blood of the portal vein. This may be effected by suturing the great omentum to a wound in the abdominal wall. This plan was adopted in the case of a 9-year-old boy suffering from acute hæmorrhagic nephritis, together with atrophic cirrhosis of the liver. In addition to the ascites, the body and limbs were markedly œdematous. It was determined that the ascites was not due to the nephritis, but altogether to the obstruction to the portal circulation. The operation, as suggested, was carried out, and the establishment of a collateral circulation between the veins of the portal system and those of the abdominal wall was demonstrated by the visible enlargement of the subcutaneous veins of the abdominal wall. After the operation the ascites rapidly diminished and eventually disappeared. The spleen was enormously enlarged also, as a result of the obstruction to the portal circulation, and, not being appreciably affected by the first operation, a second cœliotomy was performed and the spleen sutured to the abdominal wall, with the result that the organ at once began to diminish in size. S. Talma (Berliner klinische Wochen., Sept. 19, '98).

CIRRHOSIS, HYPERTROPHIC, OF LIVER.

The following are the results of an investigation into the effect of hypertrophic cirrhosis of the liver upon the reactions of the stomach-contents: (1) the total acidity is diminished; (2) the total proportion of hydrochloric acid is lessened; (3) free hydrochloric acid is much diminished, or is absent; (4) the digestive power of the stomach is weakened; (5) rennet acts slowly; (6) organic acids are only present in traces; (7) erythrodextrin, from the digestion of starch, is often abundant; (8) absorption is delayed; (9) motility is unimpaired; (10) the appetite is good or increased; no symptoms of dyspepsia are present. In diabetic patients the gastric contents were normal in their properties, or slightly hyperacid, and of greater digestive power. Kirikow (Centralb. f. d. med. Wissensch., Berlin, Aug. 20, '98).

CONGENITAL LARYNGEAL STRIDOR, OR INFANTILE RESPIRATORY SPASMS.

Diagnosis.—Congenital laryngeal stridor, or infantile respiratory spasms, resemble somewhat laryngismus stridulus, but congenital stridor begins at birth, while laryngismus rarely sets in before the period of dentition. In the majority of cases of laryngismus rickets exist, while this appears not to be the fact with congenital stridor. Laryngismus occurs in more or less violent attacks, with cya-

Digitized by Microsoft®

nosis, and eventually general convulsions. Congenital stridor accompanies inspiration for weeks and months without cyanosis or without inducing, in the majority of cases, any convulsions. Complete arrest of the respiration, such as is observed in laryngismus, does not occur in congenital stridor. The attacks of the former disease are often provoked or made worse by crying, while those of the latter are improved or entirely suspended. Laryngismus scarcely ever occurs during sleep, although it may commence as the child is awaking. In congenital stridor the stridulous sound accompanies respiration even during sleep.

As to the etiology, it is believed that the disease is a central functional disturbance, probably an arrest of development of certain co-ordinating centres of respiration, perhaps in the region of the calamus scriptorius. The prognosis is, in general, favorable. If convulsions occur, life may be threatened. Treatment is tonic, while phosphorus and cod-liver-oil are also useful. C. Stamm (Münch. med. Woch., Sept. 20, '98).

CURETTAGE OF THE UTERUS.

Absolute cleanliness in curettage of the uterus, if neglected, instead of curing the patient of the endometritis, causes in a few weeks the local condition to become worse than before the operation, while in a few months the uterus may be bound down with one or two pus-tubes, and possibly a pelvic abscess. With a small brush having a long handle, and with sterilized cotton, the vagina should be washed from the vulva to the uterus, using soap and hot water, until the parts are aseptic. Having completed the washing process, the vagina is irrigated with a 1 to 1000 bichloride solution before dilating the uterus. All women should be thoroughly bathed and the vagina irrigated before they are brought into the operating-room, but no vagina can be made clean except by thorough washing, and this must not be left to the nurse, and should always be done just before beginning the operation. The cervix is then dilated, and all the diseased tissue of the cervical canal scraped away, and then that from the body and fundus of the uterus, being careful to leave no point of disease. One should be particularly careful to carry the curette into each cornu of the uterus, so as to remove the diseased tissue at the entrance of the Fallopian tubes, for at these points the disease is even more extensive. The curette must be used very gently, but still with sufficient force to remove the structures down to healthy tissue, which can be judged by the sound and by the sense of touch that is imparted to the hand through the curette.

The curetting having been completed and the uterus irrigated with a 1 to 3000 bichloride solution, using an irrigation-tube that allows the water to flow into the vagina without obstruction, the cavity of the uterus is now gently tamponed with iodoform gauze, although it is believed by some of the most distinguished operators, however, that tamponing is not necessary; some operators do not even irrigate the uterine cavity, but wipe it out with sterilized gauze wrapped on a pair of dressing-forceps.

The success in curing the patient of the infection depends not only upon the thorough removal of all diseased endometrium, but upon preventing a reinfection. The vagina should be irrigated twice daily with bichloride solution 1 to 2000, and, if the case does not progress favorably, the uterus should also be irrigated at least once daily. In using irrigation the hands of the nurse, the irrigation-tube, and everything used should be

Digitized by Microsoft®

aseptically clean. The bulb-syringe is always septic, and it is almost impossible to prevent this, whereas the douche, when a gum bag or the glass vessel is used, is kept aseptic with but little care. The gauze is removed within from twenty-four to forty-eight hours. The patient is kept in bed for four days, but allowed to pass her water, and her bowels must be moved within forty-eight hours. After leaving the bed she should remain quiet for a few days, gradually walking after 8 or 10 days. William H. Wathen (Canada Lancet, Oct., '98).

DEAFNESS, INHERITED, SYPHILITIC.

The modes of onset of inherited syphilitic deafness may be divided into two main groups:—

1. Without giddiness.
2. With giddiness.

The first is certainly the more usual, the history being that deafness came on gradually, first in one ear; the other, sooner or later, following suit without giddiness, the eye-symptoms closely preceding the aural. As a rule, when the patient presents himself, other signs of inherited syphilis (teeth, eyes, etc.) are well marked, so rendering the diagnosis perfectly easy; but occasionally these other signs are but slight, or even altogether absent, the diagnosis resting on an insidious internal-ear deafness coming on between the ages of eight and twenty-five years, which history is pathognomonic of the disease, all other possible causes having been excluded. The eye-symptoms do not always precede those of the ear, for we meet with cases where the reverse has occurred. This reversal of the eye- and ear- symptoms must always be present in one's mind if mistakes in diagnosis are to be avoided. Urban Pritchard and Arthur Cheatle (Archives of Otology, Oct., '98).

DEGENERACY, STIGMATA.

Premature obesity, as Talbot has shown, is a nutritive expression of degeneracy, especially noticeable at the second dentition at puberty, and sometimes at the climacteric. According to Féré, lipomatosis is an expression of nutritive stress at the periods of evolution. Youthful obesity occurs usually in the descendants of degenerates. It is attended by great liability to disease and a great tendency to systemic weakness when under morbid influence. These children are particularly liable to rheumatism, gout, etc., and great hæmorrhage from slight causes.

Talbot, examining 267 corpulent school-children and adults, found that nearly all had marked stigmata of degeneracy. Ninety-two per cent. had deformed ears to a marked degree. Sixty-six per cent. had arrested development, as compared with their age, while 12 per cent. presented excessive development.

In 296 cases of puberty lipomatosis (180 males and 116 females) coming under the writer's observation, there were 10 cryptorchids, 6 hypospadiacs, and 3 cases of pseudohermaphroditism. Three females had infantile bifid uteri. Four had enlarged clitorides; in 1 of these the urethra perforated the clitoris. Of 40 girls who had reached the age of 18 only 3 had menstruated normally. The others were amenorrhœic or dysmenorrhœic, or had neurotic storms during the period. There were 160 hebephreniacs among the number; of these 120 masturbated excessively. Ten had been nymphomaniac or satyriasic, the sexual appetite having become completely extinct at 18. Fifty of the non-hebephreniacs never showed any signs of

Digitized by Microsoft®

sexual appetite. Three of the hebephreniacs were sexual inverts, while 80 practiced various perversities. Of the non-hebephreniacs 10 were cyclothymiacs, 30 had had acute forms of insanity, 10 were epileptic, and 15 hysterics. Thirteen had had chorea. Ninety-seven had difficulty in learning to speak and 30 always stuttered.

The mental relations of obesity, aside from its significance as a stigma of degeneracy, are much more extended than is usually supposed. Jas. G. Kiernan (The Alienist and Neurologist, Oct., '98).

ERGOT IN CHRONIC MALARIA.

There are cases of chronic intermittent fever, with large tumefaction of the spleen, that, after having resisted the action of quinine, arsenic, methylene-blue, eucalyptus and piperine, are benefited by ergot. When enlargement of the spleen is not old and not firmly established, the contracting effect of ergot is noticed within a reasonable time. The attacks will disappear before the diminution in the size of the spleen is marked. Though the temperatures remain irregular and be now and then somewhat elevated after the employment of ergot, chills are, as a rule, not noticed. Plasmodia do not seem to disappear from the blood so rapidly after the use of ergot as after that of quinine, when the latter is effective; but, even while some are still present, the patient will feel better, as the attacks are more or less under control. Complicating local pain requires additional treatment with ice, cold douches, or heat; chronic hyperplasia demands potassium iodide or iron iodide. Digestive disorders may indicate an emetic, a purgative, or stomachics. An experience extending over forty years, in which the writer had used ergot in many instances, justifies the assertion that there are many cases of chronic malaria, apparently intractable, that will get well if treated with ergot. Ergot, like quinine, probably by its sudden contracting effect on the spleen, and by the forcing of large quantities of plasmodia-laden blood into the circulation, is, in chronic malaria when hydræmia and splenic tumor are excessive, capable of bringing on the first attack of chills and fever. Recent cases of malaria have got better, or improved, under the extensive use of ergot, but many resisted a long time; for this reason acute cases should rather be treated with quinine. A. Jacobi (Medical News, Oct. 22, '98).

ERYTHEMA ENEMATOGENES (ENEMA RASH) IN CHILDREN.

Very few cases of enema rash in childhood have been recorded; and, although this variety of erythema is of little significance *per se*, it becomes of considerable importance in children, inasmuch as it is very easily mistaken for some of the specific fevers to which childhood is particularly exposed. The rash has a characteristic appearance and course, as was apparent from a study of twenty-six cases which occurred at the Hospital for Sick Children, Great Ormond Street. There seemed to be no reason to doubt the causal relation of the enema to the rash. In some children repetition of the enema was followed by repetition of the rash. Usually a bright-red patchy erythema appeared, especially on the front of the knees, the backs of the elbows, the buttocks, and the face; in some cases, however, the rash was scarlatiniform, or the two forms might be combined. It appeared most often twelve to twenty-four hours after the enema, and lasted usually twenty-four to twenty-eight hours; there was very rarely, if ever, any

Digitized by Microsoft ©

constitutional disturbances; the amount and time and retention of the enema and the duration of the preceding constipation did not seem to affect its occurrence. The rash occurred most often after a first enema. Children over 6 years seemed more liable to it than younger children, but it occurred in one case at 2 years and 3 months. Scarlet fever, rötheln, and measles are the exanthems for which an enema rash is most likely to be mistaken. The absence of constitutional symptoms of sore throat, coryza, and often slight differences in the character and distribution of the rash, together with the occurrence just after an enema, might serve to differentiate the enema rash. It seems highly probable that a certain number of the cases of so-called "surgical scarlet fever" are the results of enema given before operation. The erythema must be regarded as the result of a vasomotor dilatation, but how this is produced is uncertain. Three possible explanations suggest themselves: (1) absorption of some toxic substance from the soap of the enema, possibly from the fats or the resin used; (2) absorption of some fæcal toxin, thrown into solution by the enema; (3) a reflex effect on the vasomotor centres. It is perhaps most reasonable to regard the rash as due to a vasomotor change produced by absorption from the intestine of some constituent of the enema or of the fæces. Still (Brit. Med. Jour., Oct. 22, '98).

GLAUCOMA, EARLY RECOGNITION OF, BY A GENERAL PRACTITIONER.

If a person over 40 years of age desires to change his glasses frequently, if he sees colored rings around artificial lights, if he experiences short blind spells, if he complains that his sight is failing, is slow to recognize colors, has a dilated or irregular pupil, careful search should be made for all the symptoms of glaucoma. If any eye becomes quickly inflamed, lids swollen, conjunctiva greatly injected, with vision reduced to mere perception of light, glaucoma should be eliminated before making a diagnosis of anything else. J. E. Morrison (Maritime Med. News, Sept., '98).

HEADACHE.

Every case of headache, the etiology of which is at all obscure, should receive a careful examination of the eyes, and this should include a most complete examination of the refractive condition, as well as a thorough study of the action of the muscles. Nothing short of an examination by the use of a mydriatic that will completely paralyze the accommodation is sufficient, as it is impossible to discover low degrees of hyperopia and astigmatism if the ciliary muscle is active. Lenses representing the full correction of the refractive error, less 0.25 or 0.5 D., should be prescribed and their constant wear insisted on. William H. Wilder (Jour. of Amer. Med. Assoc., Nov. 19, '98).

HEROIN.

Dreser has shown that heroin is ten times more powerful than codeine in its effect upon the respiration, and that its fatal dose is ten times that of codeine. It reduces the frequency of respiration and at the same time increases the length of inspiration by its action upon the respiratory muscles. The result is an increase in the volume of the individual respiration. It induces general muscular repose of the entire body, and has much less convulsive tendency than codeine. It reduces the production of carbonic-acid gas by one-fifth its orig-

Digitized by Microsoft®

inal volume, and it does not lessen the sensibility of the respiration. The sensibility of the lungs to mechanical distension is lessened by it, but not abolished.

In the writer's experience with heroin he found disagreeable after-effects in only a few cases, the symptoms induced referring chiefly to mild disturbances of the sensorium. These were less than those induced by morphine and codeine. The dose must be small when administered to aged people. It was found prompt and effective in allaying cough. It can be administered in watery solution if dissolved by the addition of a few drops of acetic acid; it can be rubbed up with sugar and dispensed in powders; or it can be given in tablet-triturates in doses ranging from $^1/_{12}$ to $^1/_6$ grain. Morris Manges (New York Med. Jour., Nov. 26, '98).

HYDROCHLORIC ACID IN TREATMENT OF DISEASES OF THE STOMACH.

Could all cases of gastric derangement, including the earlier stages of catarrhal affections, be brought to the test of a chemical analysis of the stomach-contents, it is probable that those with either a normal or excessive secretion would be largely in the majority. And none of these require the administration of HCl as a medicine. Indeed, it is capable of doing pronounced harm in all such cases. We should expect, *a priori*, that to introduce this active drug artificially into stomachs which already secrete it in too large quantities would intensify the depressing and painful symptoms of hyperchlorhydria.

The well-known antiseptic power of HCl might tempt one to give it in the numerous cases in which, despite the presence of a normal percentage of this acid in the gastric juice, the patients suffer from eructations of gas as a result of fermentation in the stomach, and (as still more frequently happens in cases with a normal or overabundant secretion of gastric juice) are troubled with a large amount of intestinal flatulency. To administer HCl in cases in which it is not deficient is not only to do no possible good, but generally to do harm, and for these reasons: This drug acts, even in small doses, as a decided stimulant to the gastric glands, and when long continued rarely fails to increase largely their activity, except in gastric atrophy or cancer. This property, which renders it so useful as a remedy when the gastric juice is insufficiently secreted, becomes a cause of injury in the opposite condition. Therefore, HCl taken into a stomach already fully supplied with it, and the stomach-contents after meals being thus as acid as nature intended them to be, must not only produce at the time an excessive degree of acidity, with all the harmful results, especially to the digestion in the small intestine, which this implies, but, if administered often enough, may easily set up a more or less permanent hyperchlorhydria.

But it may be urged that we might risk some overacidifying of the gastric juice and the resulting impairment of intestinal digestion if by this means we could lessen fermentation in the stomach. Unfortunately, however, in the cases in which there is no deficiency of HCl, very little, if any, antiseptic action can be demonstrated as a result of its administration. The gas-forming bacteria seem to acquire a tolerance for the HCl and to thrive in spite of it.

Riegel says "that the presence of free HCl in the stomach-contents is no hindrance to the development of an abundant gaseous fermentation is a long-since es-

Digitized by Microsoft®

tablished clinical fact, which, through the researches of Kuhn and Strauss, has been given a further support. It has been proved that the HCl of the gastric juice under the existing conditions has absolutely not the disinfecting properties against the yeast fungi which has been established for it in a pure solution of the drug or in artificially-prepared gastric juice, but, on the contrary, the view always maintained by us has been confirmed—that when stagnation exists the preferred soil for the gaseous fermentation is afforded by just those cases which show a normal or overlarge amount of HCl."

There are a few prominent gastro-enterologists who seem to place little reliance upon HCl in any case, but the writer has found it of exceeding value not only as a palliative in cases of atonic dyspepsia, but also as a reconstructive tonic in cases of chronic gastric catarrh which have not yet progressed to entire atrophy of the glands.

A large number of cases observed in which the administration of HCl for from one to four months, more or less continuously, has been followed by a most notable and apparently permanent increase in the secretion of the gastric glands. In the majority of those cases massage and the use of pulleys or other suitable exercise for the strengthening of the trunk-muscles were also employed as a regular part of the treatment.

Hemmeter gives 20 drops of the diluted HCl in appropriate cases in 2 ounces of water every half-hour, beginning fifteen minutes before meals and continuing it till half an hour after the meal. He has frequently seen excellent results from this method and believes that the motor function of the stomach is favorably influenced as well as the glands, a view which the writer's own experience confirms. The writer's practice has been to give much smaller doses. He directs the patient usually to begin with a dose of 4 or 5 drops of the dilute HCl after each meal in this way: The amount prescribed, which is gradually increased if necessary up to 10, or exceptionally even to 20 drops, is added to half a goblet of water which the patient is directed to take in small sips at frequent intervals during an hour or an hour and a half. In cases of complete or nearly complete anacidity the sipping of the diluted acid is begun immediately after the meal, but in other cases, not till the meal has been over for half an hour. In this way the amylaceous portions of the food are given time for the action of the saliva. This gradual method of administering the acid was adopted through having observed a number of cases with absence of free HCl in which the patients complained of a marked burning in their stomachs after taking quite small doses of the remedy. This apparent intolerance of the drug was overcome entirely by having it taken gradually in small sips, and the results eventually were quite as gratifying as in other cases in which no such disagreement has occurred.

Except in those cases where, in spite of deficient or absent HCl secretion, there had been demonstrated a normal proportion of pepsin or of pepsinogen, the writer has usually combined with HCl a moderate amount of a good preparation of pepsin in the form of glycerole. Boardman Reed (International Med. Mag., Oct., '98).

HYMEN, UNRUPTURED, IN PREGNANCY.

Case in which a single woman, aged 23, became pregnant after a single connection, which was incomplete and very

Digitized by Microsoft®

painful. At the labor the hymen was found very tough, and its orifice, placed anteriorly, scarcely admitted a fine probe. The vagina seemed normal.. Not until the spontaneous rupture of the membranes did the writer incise the hymen. The child was delivered spontaneously an hour later. The hymen was half a centimetre thick. Albespy (La Gynécologie, Aug. 15, '98).

INOPERABLE ANGIOSARCOMA CURED BY ELECTROLYSIS.

The writer has waited more than three years before recording this case as cured. The patient, a girl of 16, presented a tumor of the neck as large as a child's head, which had only been observed for two months. It had not caused any pain, nor was it tender on pressure. It was regarded as a lipoma. On September 13, 1894, an attempt was made to excise it. The greater part of it was removed in fragments; the deeper portions, which infiltrated the muscles of the neck and extended still more deeply between the transverse processes of the vertebræ, were left behind. The wound was swabbed with chloride of zinc and stuffed with gauze. Microscopic examination of the portion removed showed the structure of an angiosarcoma. On the sixth day the remains of the tumor were attacked by electrolysis. Four needles, connected with both poles of the battery, were driven into its substance in all directions; the current employed was one of 500 milliampères. This was followed by the sloughing of the tumor in large pieces. The wound became clean, and promised to heal. By October 13th recurrence had taken place, so the electrolysis was renewed, without an anæsthetic, on four successive days. Extensive sloughing followed; the wound filled up with healthy granulations, and healed by November 1st. The patient was seen again in April, 1898, and presented the appearance of perfect health, without a trace of recurrence. Paul Videbech (Centralb. f. Chir., Leipzig, Aug. 6, '98, No. 31).

MASTITIS.

Treatment.—Having discovered the existence of an inflammatory movement in the breast,—of any grade of severity or at any stage of advancement short of the formation of an abscess,—nursing, friction, pumping, fomentation,—in fact, every local measure—excepting such as are calculated to secure complete rest of glands, rest from passive motion, rest from secretion, and rest from pain—should be interdicted.

The affected gland is to be enveloped in absorbent cotton; and the patient, sitting up, a plain roller bandage, ten yards in length and two and one-half inches wide, is employed. Assuming that the right breast is the seat of mastitis, the dressing is applied by lifting the affected glands with the bandage, carrying it over the left shoulder two or three times, thence around the waist below the left breast and arm and over the right shoulder; thence under the left breast and over the right shoulder once or twice; thence around the chest over the sternum above each gland, bringing the bandage across the right breast or affected gland; continuing this until the affected gland is completely covered. The nipple of the unaffected gland should be left out for the child to nurse. The whole gland should be enveloped in absorbent cotton, same as the affected gland, which can easily be separated to expose the nipple.

When this dressing is complete it will resemble the figure 8. The bandage should be pinned with safety pins at each

Digitized by Microsoft®

point where it is likely to slip. This dressing may be left for 24 or 48 hours, after which time it should be removed and reapplied, making it tighter each time. Ninety per cent. of the cases of mastitis treated in this way will get well without suppurating.

The gland should be carefully examined at each dressing, and, if there is any formation of pus, the patient should at once be anæsthetized and free incision made at the most dependent point of the abscess. The index finger, being aseptic, should then be introduced into the abscess-cavity and all pockets of pus, if there be any, broken up, then washed out with peroxide of hydrogen and packed with iodoform gauze, then re-bandaged. This dressing may be changed every 48 hours for one week; after this period the patient or nurse may do the dressing. J. B. Jackson (Amer. Pract. and News, Oct. 15, '98).

MYXŒDEMA.

The first symptom to be taken into consideration in arriving at a diagnosis of myxœdema is the external appearance of the patient, the increase in the size and bulk of the body, due evidently in part to changes in the skin, and in part to changes in the subcutaneous tissue. The changes in the skin affect more or less the whole surface and determine the changes in the appendages of the skin, in the hair, the glands, and the organs of touch. The mucous membranes also are subject to altered states resembling those in the skin, and leading to the destruction of its appendages. It is a point of much importance that the swelling of the skin and mucous membranes is not an ordinary dropsical swelling. It does not in any way gravitate from the upper parts of the body to the lower, and does not pit on pressure, but is firm and resilient. There is a group of symptoms indicating in various ways the impairment of the functions of the nervous system, such as slowness in muscular movement, tardiness in response to impressions made upon the surface of the body, slowness in thought and action, weakening of memory, disturbance of the balance of muscular actions of the limbs. The quality of the speech and the sound of the voice are perfectly typical of the disease, and depend on the combined effects of the swelling of the lips and the fauces, and failure of the movement of the muscles within the swelling and by default of nervous power controlling the action of the muscles.

There may exist also various degrees and kinds of mental aberration. The symptoms of the second degree are the lowering of the body-temperature as a tendency to hæmorrhage following comparatively slight injury. The affection is largely confined to the female sex. There is no disorder of the viscera that can be called characteristic of myxœdema, although visceral trouble may arise in the course of the disease, chiefly from external or new causes. Ordinarily, the thyroid is found in a state of atrophy. In some cases enlargement of the gland has preceded contraction and atrophy, and this will probably be more observed as the patients come under notice earlier. Myxœdema has a number of times followed upon exophthalmic goitre. William M. Ord (Brit. Med. Jour., Nov. 12, '98).

NEPHRITIS OF MALARIAL ORIGIN.

Conclusions drawn from study of 758 cases of malarial fever:—

1. Albuminuria is a frequent occurrence in the malarial fevers of Baltimore, occurring in 46.4 per cent. of our cases.

2. It is considerably more frequent in

Digitized by Microsoft®

æstivo-autumnal infections than in other forms, occurring in 58.3 per cent. of these instances against 38.6 per cent. in the regularly intermittent fevers.

3. Acute nephritis is not an unusual complication of malarial fever, having occurred in 2.7 per cent. of the cases treated in the wards of the Johns Hopkins Hospital, and in between 1 and 2 per cent. of all cases seen at the institution.

4. The frequency of acute nephritis in æstivo-autumnal fever is much greater than in the regularly intermittent fevers, having been observed in 4.7 per cent. of the cases treated in our wards, and in 2.3 per cent. of all the cases seen.

5. The frequency of albuminuria and nephritis in malarial fever while somewhat below that observed in the more severe acute infections, such as typhoid fever, scarlet fever, and diphtheria, is yet considerable.

6. There is reason to believe that malarial infection, especially in the more tropical countries, may play an appreciable part in the etiology of chronic renal disease. William Sydney Thayer (Amer. Jour. Med. Sciences, Dec., '98).

PHENOCOLL.

V. Cervello and other observers contend that this drug possesses antimalarial properties; that it can take the place of quinine, and that in some cases it is superior to it. It has great absorbent power and antithermic action without possessing those deleterious effects exhibited by quinine.

The writer tried phenocoll on all those febrile conditions diagnosed by him as malarial—both in adults and children.

The salt employed in all the cases was the hydrochlorate only. The doses prescribed varied from 22 1/2 grains to 30 grains daily for adults, and from 5 to 15 grains daily for children. The results have been brilliant. Sometimes the amelioration was temporary. In such cases, which were generally chronic and of many years' standing, an hypodermic injection of the bihydrochlorate or of the hydrochlorosulphate of quinine is given first, and soon after a generous dose of the phenocoll salt (7 1/2 grains, or a little more or less, according to the case), repeating it every two or three hours for three or four doses. In some cases its effect has been negative.

The writer has found it satisfactory to administer the doses every two hours, provided the last dose be given at least an hour and a half before the advent of the next paroxysm.

The effect of this remedy has been observed in over a hundred cases of malarial fever during the past few years. In all these cases only a few failures have been met with, and these were probably not due so much to the action of the drug as to the method of using it.

When phenocoll is used as widely and extensively as quinine is to-day we may find that it is a specific that has no failures. Cesare Mondini (Amer. Gynæcological and Obstetrical Jour., Nov., '98).

PILONIDAL SINUS.

The occurrence of a suppurating sinus containing hair and located in the coccygeal region is by no means very uncommon. In some cases the sinus becomes clogged and an abscess forms. That the real cause of the suppuration is not always recognized is shown by the fact that cases often come to our clinics in which the sinus has been opened and packed, in some instances several times, without removing the little tuft or coil of hair which gives rise to the trouble. Probably a slight congenital dimple, in which perspiration and filth accumulate

Digitized by Microsoft®

and an abundant hairy growth, exists in some cases as a predisposing cause. It is said never to occur until after puberty, when the hairy growth in these parts is well developed. The name pilonidal sinus has been suggested for this condition. Its derivation, from pilus, a hair, and nidus, nut, seeming to make it the best descriptive name. The most essential point, however, is that the condition be recognized, and the hair, including its roots, thoroughly removed. Editorial (Phila. Med. Jour., Oct. 15, '98).

PROLAPSE OF THE FUNDUS.

Treatment.—A few guiding rules, that the writer has deduced from his study and observation of the Trendelenburg position in treating prolapsed fundus, are as follows:—

1. The diagnosis to be made promptly.

2. Once the diagnosis is clearly established, no time is to be lost in putting the woman in the Trendelenburg position.

3. Now that the woman is placed in the desired position, the clean, lysolized right or left hand is introduced into the vagina. The hand is preferable to the customary two fingers. If the presenting part, be it breech or vertex, is not well engaged in the os, the chances are the hand will not find the cord in the vagina, on account of its having gravitated to the fundus. In that event the hand is not to be withdrawn, but is to be kept in the vagina until the next pain, to make sure that the contraction of the uterus does not cause a recurrence of the prolapse. Should, however, the presenting part be so tightly wedged in the os as to afford no inlet for the cord, it should be pushed up, and the cord will disappear with marvelous rapidity. The same precaution, of keeping the hand in the vagina until the next one or two pains, must be observed in this as well as in the supposed preceding instance.

4. If the pains are strong and the chances to bottle up, as it were, the wayward cord in 10 or 15 minutes are good, the woman can be safely kept in the Trendelenburg posture. If, however, the reverse condition obtains, the elevated pelvis should be reduced half the original height, in order to secure comfort for the woman and no return of the prolapse.

5. In case the prolapse shows a tendency to recur in spite of frequent repositions (and this is not likely), forceps should be applied or version practiced. No time is to be wasted in attempting to plug the os with sponges, gauze, or anything else.

6. When the prolapse of the cord is associated with an abnormal presentation, the cord is first to be restored, and then the case is to be treated according to established methods, remembering always that the Trendelenburg position is an ideal one for version, especially external.

The next point for consideration is how to place the woman in the new posture.

In hospital practice the difficulty offers no obstacle. Every well-equipped hospital is supplied with a table suitable for the Trendelenburg position. In private practice, and especially among the poor, the problem can be solved in one or two ways. An inverted chair previously covered with a pillow can be placed under the patient's pelvis; or, perhaps a better method is to put an ironing board under the patient, while she retains her recumbent position, and bring her popliteal spaces to the edge of the board, then putting something, as a chair or washboard, under it. This plan secures greater stability and steadiness of the woman's

Digitized by Microsoft®

body. R. Abrahams (Phila. Med. Jour., Oct. 8, '98).

SOMATOSE.

Somatose exercises a specific effect upon the mammary glands of nursing mothers; it produces an ample secretion of the mother's milk, and causes the ailments occurring during nursing to disappear quickly. The dose consists of one teaspoonful in a cup of warm milk, soup, cocoa, etc., from three to four times a day. Felix Heymann (Deutsche medizinal-Zeitung, '98, No. 59 u. 63).

SPINA BIFIDA.

Treatment.—Any case of spina bifida may be operated on with a fair chance of success. If the neck of the sac is small it is sufficient to pass a ligature about it. In larger sacs rows of catgut suture are employed. Long flaps of skin and mesoblastic tissue are used to close in the gap. The sutures are applied in such a manner that the redundant margins of the mesoblastic flaps are curled inward, just as the cut margins of intestine are curled inward, by a Lembert suture. The skin is sutured in a similar manner, but its edges are turned outward. The ridges thus formed in the median line add to the strength of this posterior covering of the spinal canal. Of 32 patients operated upon 25 recovered. Nicoll (Brit. Med. Jour., Oct. 15, '98).

STOMACH, DISEASE OF.

Treatment. — The writer treats the cases of atony of the stomach mainly by the application of a continuous current to the solar plexus and to the ganglia of the sympathetic and vagi in the neck. He rarely makes intragastric application of electricity, as he thinks it is the galvanization of the ganglia that is beneficial. He considers of great benefit in atony of the bowel and constipation, as well as in atony of the stomach, a primary coil, wound with very thick wire, capable of giving very slow interruptions. It causes peristaltic action in the intestines, its application on several occasions having been followed by an immediate stool. It also acts in restoring tone to the abdominal muscles. An indifferent electrode is placed on the buttocks and the other pole applied with a roller electrode over the abdominal muscles and intestines, following the curve of the colon and using interruptions of from 120 to 200 per minute. Vibration of the stomach is recommended as a mode of treatment. In the treatment of atony much benefit has resulted from douching the stomach alternately with hot and cold water by means of a Türck double-current stomach-tube. A *séance* of ten minutes' duration is given, the temperature of the water being changed every sixty seconds. As to diet in cases in which the secretion of hydrochloric acid is in excess, a carbohydrate diet partially dextrinized is advised, the greater part of the hyperacidity of the stomach being at the same time neutralized with large doses of alkalies. The use of peptones and albumoses is limited to cases in which the ordinary diet is found to be insufficient to preserve the nitrogenous equilibrium of the body. Pepsin by the mouth is never indicated, as when pepsinogen is really absent there is also such a deficiency of hydrochloric acid that a sufficient quantity of the latter could not be given by the mouth to digest even a small meat-meal when combined with the pepsin administered.

Pancreatin can only be given in rare cases in which there is complete absence of hydrochloric acid in the stomach, as the ferment is completely destroyed by normal gastric juice. When mastication

Digitized by Microsoft®

is imperfect or the teeth defective, and when the presence of an abnormal amount of hydrochloric acid occurs in the stomach, taka-diastase is recommended, in order to admit of the administration of a diet containing a large proportion of carbohydrate. In cases of hyperchlorhydria, hopeful results have been obtained from preparations of tannic acid and from lavage of the stomach, first with a solution of sodium carbonate, and then with a 1-per-cent. suspension of calcined magnesia, and finally with a 0.5-per-cent. solution of tannic acid or a suspension of bismuth subnitrate. When hydrochloric acid is wanting large doses of the dilute acid are administered. Strychnine, vegetable bitters, and salts of orexin are also used in this condition. None of the germicides have been found useful. The stomach is washed out sufficiently to keep the patient comfortable when the hydrochloric acid and regulation of the diet fail to stop the abnormal fermentation. Herschell (Brit. Med. Jour., Oct. 29, '98).

SYPHILIS, INFANTILE.

A number of trials made of the hypodermic method of treating acquired or inherited syphilis in children with very satisfactory results. The solution used was composed of 2 $^1/_4$ grains each of benzoate of mercury and chloride of sodium in 3 $^3/_4$ drachms each of glycerin and distilled water. Of this 2 divisions of the ordinary Pravaz syringe, or $^1/_{100}$ grain of the mercurial salt, are given to infants of 1 month, 3 divisions to those aged 2 or 3 months, 4 to those aged 4 to 6 months, and 5 to those between 7 months and 1 year. With children of more than 1 year the strength of the solution is doubled, and 3 to 6 divisions of the syringe injected, according to age. The injection is repeated every three or four days. This treatment has always been well supported and has never provoked general disturbance, stomatitis, or digestive trouble. At the point of injection there has been no inflammatory reaction or induration. The buttocks have been found to offer the most satisfactory region for injection, and 4 insertions can readily be made on each side, the solution being thrown deep into the muscles. The therapeutic results have been most favorable. Recent macular eruptions have disappeared after 3 or 4 injections, papular and ulcerous syphilis after 6 or 7, and gummous lesions after 9 or 10. The treatment is continued until complete disappearance of every manifestation of the disease, and is then suspended three to five weeks, after which 6 to 8 injections are made. The child is then kept under observation for at least three months. Relapses have never been observed. Fedtchenko (Semaine Méd., No. 9, '98).

TRIONAL.

The writer administers trional in carbonated water, which, by reason of the carbon dioxide contained in it, dissolves the drug and conceals its taste. It also hastens its action, so that the patients often fall asleep within 10 minutes after drinking the half or the quarter of a 12-ounce bottle containing only 15 grains of the drug. Habermann (Centralb. für inn. Med., Sept. 17, '98).

TUBERCULOSIS, INFANTILE.

Diagnosis.—Pulmonary tuberculosis in children frequently manifests itself without a cough. There may be moist râles at times, a little harsh breathing, and slight elevation of the temperature. Frequently there are small areas of dullness in the lung, caused by either consolidation or from enlarged and swollen bronchial

Digitized by Microsoft®

glands. Then, again, there are cases of tuberculosis in which there may be no pulmonary symptoms on either percussion or auscultation, and where the clinical history is absolutely negative.

The symptoms to be relied upon chiefly in making a diagnosis are loss of weight, disturbances with digestion, a slight attack of febrile malaria, besides constant irritability. Such children will frequently show very slight, if any, pulmonary symptoms, so that the diagnosis must be made by a process of exclusion. Such distinct diagnostic features as the presence of cough, expectoration and tubercle bacilli, dullness on percussion, with moist râles and night-sweats, as found in the adult, are out of the question. It is not an easy matter to diagnose a case of tuberculosis, and it is safe advice "to observe a suspected case of tuberculosis for several weeks, and sometimes months, before giving a positive opinion relative to either the diagnosis, or, more particularly, to the prognosis in a given case."

Treatment.—The treatment consisted of supporting diet,—giving a highly concentrated form of food in as small a quantity as possible. Thus, eggs and milk and expressed meat-juice and the farinaceæ are chiefly used.

No drug that has ever been used has been found as efficacious as codliver-oil and creasote. The former to be given in a 25-per-cent. emulsion, and if the stomach tolerates it, increased gradually, giving a 50-per-cent. emulsion, and if this is well borne the pure codliver-oil, a teaspoonful to a child under 5 years three times a day. If, however, the stomach will not tolerate codliver-oil, then it may be used in the form of the bath, *i.e.*, by inunction. The writer's plan is to have the child's body sponged with soap and water, then the skin dried thoroughly with a coarse Turkish towel and the child's body, chiefly the chest and abdomen, rubbed for about five or ten minutes every morning.

Creasote is the only drug to be used in this disease. While formerly we were restricted to the use of the ordinary beech-wood creasote, within the last few years chemistry has given us the creasote carbonate, of which is given to children of 1 year 1 drop, children of 5 years 5 drops, three times per day. In other words, 1 drop for each year, until 10 drops three times per day are given. Symptomatic treatment is not contra-indicated, and urgent symptoms of whatever nature should be properly looked into.

If necessary alcohol should be used, but cautiously.

No medicine, however, can equal fresh air and sunshine and cleanliness. Louis Fischer (Jour. of American Med. Assoc., Oct. 29, '98).

TUBERCULOSIS OF THE MIDDLE EAR.

Tuberculosis of the middle ear occurs much oftener than is thought and is usually the result of infection from the pharynx. It may remain latent for a good while and its symptoms are sudden appearance of pus in the external auditory canal without previous or but very slight symptoms of inflammation. The absolute differential diagnosis is made by finding the bacillus of tuberculosis in the pus. This is not always easy, and a number of specimens may have to be examined. In a large majority of the cases there are signs of pulmonary tuberculosis present. When there is not there will usually be found a primary tuberculous focus somewhere else in the body. Attention to the general health, local cleansing, and perhaps the application

Digitized by Microsoft®

of the quasicaustics, used for tuberculosis of the larynx, lactic acid, and the like, are the best treatment. Seymour Oppenheimer (Med. News, Oct. 29, '98).

TUBERCULOSIS, PULMONARY.

Treatment.—A fundamental principle in the treatment of pulmonary tuberculosis is to keep the patient most of the time in the open air and in a sunny place. Bathing is also important. A tepid or cool sponge-bath should be taken every morning, and be followed by friction of the surface. A hot bath may be taken once or twice a week. The most suitable articles of diet are raw beef, eggs, baked potatoes, boiled rice, and boiled young beets, cocoa, chocolate, and milk. The last named should not be taken at the same time as meat. If there is much involvement of the lung, little or no exercise should be taken. For their local action inhalations of essential oils containing various medicaments are to be preferred. One of the best vehicles for this purpose is essence of peppermint. A cheap and efficient inhaler may be improvised from a cigar-holder packed tightly with absorbent cotton. Five or 10 drops of the following mixture should be placed in this inhaler, and renewed every two or three hours: Menthol, 1 part; spirit of chloroform, guaiacol, terebene, eucalyptol, and thymol,—of each, 2 parts. In connection with the constitutional treatment of pulmonary tuberculosis it is well to bear in mind that guaiacol can be made into a perfect emulsion with milk of magnesia. If creasote is taken it must be a very pure article and must always be given with food. The dose should be gradually increased, the urine and the tolerance of the stomach being watched, and if it seems wise to diminish the dose, this should always be done gradually. When there is much bronchial irritation, the cough is best treated by inhalations or with hydrocyanic acid and chloroform-water. Delancy Rochester (Phila. Med. Jour., Oct. 29, '98).

UROTROPIN.

Use of urotropin as a urinary disinfectant urged. This is a substance formed from the union of ammonia and formaldehyde, with the formula $C_2(H)_6N_4$, and appears in the form of colorless crystals. The drug causes alkaline urine to become acid, thereby clearing its turbidity, and has such an inhibitory effect upon the development of microorganisms that they do not grow in urine in which it has been excreted, even after artificial inoculation. In doses of 30 grains per day it renders alkaline urine acid, prevents the development of bacteria, and it is indicated as a disinfectant before operations on the urinary tract. Wilcox (Med. News, Nov. 12, '98).

VAGINITIS, GONORRHŒAL.

Treatment.—In gonorrhœal vaginitis the patient is put to bed and vaginal injections of formaldehyde, 1 to 500,—to which is added 1 ounce of glycerin to the quart,—are given. After the first week's irrigation, twice daily, with this solution, the gonococci disappeared from the discharge altogether in cases observed by the writer.

In adults a formaldehyde solution in the strength of 1 to 1000 is used for deep urethral irrigation. It causes irritation during the process of injection, which ceases soon after. I. L. Polozker (Physician and Surgeon, Nov., '98).

Digitized by Microsoft®

P
Med
M

THE

MONTHLY CYCLOPÆDIA

Medical
Bulletin

(OF

PRACTICAL MEDICINE

(AND

Universal Medical Journal.)

EDITED BY

CHARLES E. DE M. SAJOUS, M.D.,

PHILADELPHIA.

Vol. XII, Old Series. Vol. I, New Series.

PHILADELPHIA, NEW YORK, CHICAGO:

THE F. A. DAVIS COMPANY, PUBLISHERS.

1898.

Digitized by Microsoft®

COPYRIGHT, 1898,
BY
THE F. A. DAVIS COMPANY.

[Registered at Stationers' Hall, London, Eng.]

Digitized by Microsoft®

Names of Authors Quoted in the Monthly Cyclopædia of Practical Medicine During the Year 1898.

Aaron, Charles D., 461.
Abadie, 151, 299.
Abbott, 37.
Abrahams, R. 473.
Abrams, Albert, 459.
Abt, 277, 301, 303.
Achalme, 58.
Actandor, 74.
Adair, 178.
Adami, J. G., 379, 435.
Adams, 129.
Adamson, 173.
Adler, T., 428.
Ainslie, 206.
Aiken, 206.
Ajello, K., 48.
Albespy, 469.
Alexander, 114.
Alexieff, 141.
Alfaro, 145.
Allen, 108.
Allyn, H. B., 11, 12.
Amelung, 211.
American Pædiatric Soc., 301.
Amidon, Royal, 94, 96.
Anderson, 179, 311.
Anderson, William, 445.
Angelo, Michael, 157.
Annesley, 205, 216.
Archinard, S. E., 333.
Archintre, 205, 215.
Armstrong, 288, 329.
Arnold, 48, 118.
Arnold, J. P., 21.
Ashby, 272.
Ashby, H., 300.
Asselberg, 155.
Atkey, 190.
Attygalls, J. W. S., 349.
Attygalls, 235.
Aubert, 291.
Audry, 290.
Auerbach, 302.
Aufrecht, 450.
Avetoom, 212.
Ayres, S. C., 33.

Baccelli, 19.
Bacon, Gorman, 10.
Baginsky, 256.
Bahadurji, 210.
Baker, Sir G., 214, 217.
Ballingall, 206.
Balmair, 206.
Banerjee, 225, 229.
Bannatyne, 317.
Bannatyne, Gilbert, 60, 78.
Bantock, G. G., 392.
Banzet, 252.
Barker, 236.
Barker, Lewellyn F., 447.
Barlow, 45.
Barnes, 156.
Barnett, 84.
Barnick, Otto, 445.
Barozzi, 157.
Barrs, A. G., 98.
Baruch, 302, 96, 452.
Bassères, 20.
Bastian, 348.
Bastianelli, 19.
Baumler, 64.
Beach, 60.
Beale, Clifford, 22.
Benda, 444.
Benjamin, Joseph, 226.
Bennecke, 237.
Benzler, 332.
Berg, 454.
Berger, 195.
Bergonié, 21.
Berkley, 356.
Berlizheimer, 260.
Bernada, 186.
Bertran, 296, 350.
Bertrand, 204, 230.
Besnier, 293.
Bettman, H. W., 398.
Bictre, 213.
Bidder, 198.
Biddle, 176, 208, 210, 211, 212, 215.
Bidwell, L. A., 417.
Bigelow, 184.
Bigg, A. H., 306.
Bignami, 13.
Binz, C., 405.
Bishop, 124, 129, 237.
Bixby, 178.
Black, 266, 272.
Black, J., 61.
Blacklock, 179.
Blanc, 187.
Blanchard, 187.
Blatters, 186.
Bloch, 116, 275.
Block, 150, 153.
Blom, 177, 183.
Bloom, 253.
Blumenau, 57.
Blumenthal, 142.
Boas, 247.
Bochefontaine, 63.
Boeck, 437.
Bolton, 274.
Bondurant, 8, 126.
Bontor, S. A., 305.
Booth, T. Carter, 28.
Boru, 211.
Bosc, 215.
Bose, 180.
Bostwick, W. W., 43.
Boudin, M., 173.
Bowie, J. C., 45.
Bowles, 257.
Boynton, 248.
Bradbury, J. B., 43.
Brakenbridge, 218.
Bramwell, Byrom, 43, 56, 57.
Bramwell, Herbert, 69.
Brenning, 228.
Bresler, 12.
Breton, 185.
Briegel, 277.
Brieger, 310.
Brill, 38.
Broadbent, Wm., 55, 111, 370.
Brockbank, 410.
Brocq., 119, 221, 435.
Brousse, M. A., 290.
Brown, Bedford, 16, 18.
Brown, J., 183, 187.
Brown, W. H., 448.
Brown-Daland, 117.
Brown-Séquard, 49.
Bruce, 354.
Brunner, W. F., 161, 342.
Bruns, 11.
Bryan, 112.
Buchanan, W. J., 6, 209.
Buck, A. H., 324.
Bue, 264.
Bulkley, 293, 356.
Bulkley, L. D., 79, 284, 347. 442.
Bull, C. S., 326.
Burd, 177.
Buret, 381.
Burlureaux, 443.
Burot, 259.
Burr, 125.
Burrage, W. L., 33.
Burwinkel, 109.
Butler, 173, 208, 214.
Buxton, Dudley, 71.
Byers, 132.
Byford, H. T., 345.

Cabot, 364.
Caddy, 207.
Cadell, 132.
Caillé, 305.
Calagus, 180.
Calmette, 230.
Calot, 156.
Calvert, 180.
Cambay, 207.
Cameron, 130, 133, 265.
Campana, 381.
Campbell, 147.
Campbell, Munro, 72, 181, 211
Cantlie, James, 313.
Cantrell, J. A., 192.
Capitan, 449.
Capozzi, 41.
Cardamatis, 18.
Carpenter, G., 284.
Carr, J. W., 445.
Carratu, 98.
Carrière, 247.
Carrière, G., 86.
Carter, H. R., 334, 340.
Carter, W. S., 47, 72.
Cartier, 381.
Castellate, R. H., 168.
Cawaigee, 174.
Cawasjee, 179, 181, 208, 211.
Celli, A., 13, 17.
Cerna, 186.
Cervello, V., 471.
Chalmers, 262.

Digitized by Microsoft®

Chambers, 217.
Chapin, H. D., 283, 451.
Chaplin, 22.
Chapple, 172.
Chapteloube, 23.
Charcot, 126.
Chartonneau, 84, 85.
Chateaubourg, 156.
Chauffaud, 299.
Chauvel, 31.
Chavasse, 181.
Cheadle, 124.
Cheadle, W. B., 59, 61.
Cheatle, Arthur, 464.
Cheron, 405.
Chevers, 189.
Chittenden, 278.
Christian, 53.
Christian, H. M., 395.
Christiani, 394.
Churton, 124.
Chvostek, 59.
Clapton, 217.
Clark, 214, 352.
Clark, J. P., 76, 117, 180, 183, 210, 213.
Clauston, 232.
Cleghorn, 206.
Coe, 81.
Coleman, 89.
Coleman, J. B., 57.
Colin, 189, 253.
Collier, 128.
Collins, J., 78, 125.
Colombini-Gerulli, 385.
Comby, 44, 258.
Connell, 132.
Cooke, 244.
Cookman, 197.
Cooper, 385.
Cooper, P. R., 455.
Cordier, 417, 420.
Cordna, 154.
Cornell, 124.
Cornillon, 325.
Cornillon, J., 409.
Cornish, 207.
Coxe, 137.
Coyon, 58.
Cramer, 420.
Crandall, 258, 300, 301.
Crandall, F. M., 454.
Crary, G. H., 297.
Crombie, A., 397.
Croonenberghs, 167.
Crosthwait, 233.
Crothers, T. D., 35, 268.
Crouse, H. W., 61.
Cucco, 186.
Cumbali, 211.
Cumston, 255, 399.
Curtin, 158.
Curtiss, J. H., 355.
Czapleroski, 303.
Czaplewski, 36.
Czerny, 44, 250.

Dabney, 382.
Dakin, 124.
Daland, J., 350.
Dana, 126.
Daniel, 205.
Danilewsky, 14.
Darezac, 150.
Dauber, J. H., 435.
Davezac, 292.
Davidson, 292.
Davies, Arthur, 86.
Da Rinci, Leonard, 157.
Davis, A. E., 446.
Davis, N. S., 243, 325.
Dawson, 18.
Dayabhar, 214.
Dayus, 260.
Deaver, J. B., 70, 238.
Defontaine, 154.
Deguy, 296.
De Holstein, 249.
De Konick, 184.
De Leon, 130, 133.
Delioux, 207.
Delore, M., 380.
Delteil, Ardin, 212.
Démelin, 10.
De Mera, 178.
Demons, 31.
Dempster, 179.
Denys, 250.
Dercum, F. X., 354.
De Rothschild, H., 286.
De Santi, 188, 189, 191.
De Schweinitz, 319.
Descomps, 23.
Despeignes, 47.
D'Esterre, 32.
Dessau, 256, 287, 302.
Dickinson, 60.
Dieulafoy, M., 377, 413.
Dinami, 448.
Dirner, 421.
Disen, 21.
Dittmar, 140.
Docker, 207.
Donald, 146.
Donelan, 37.
Dorput, 175.
Dorward, 179.
Douglass, 214, 272.
Doumer, M. E., 305.
Downes, A. J., 67.
Doyen, 36, 297, 298.
Drake, 142.
Drake-Brockman, H. E., 49.
Drejer, 429.
Dreschfeld, 152.
Dreser, 466.
Druitt, 218.
Du Cazal, 173.
Dudley, E. C., 268.
Duer, 147.
Duffin, 218.
Duhring, 378.
Dujardin-Beaumetz, 170.
Duke, Alexander, 84.
Duke, Joshua, 229.
Dulles, 135.
Dumas, 85.
Duncan, 84, 185.
Durant, 213.
Dürck, H., 451.
Durek, 93.
Durodie, 242.

Eagleton, W. P., 10.
Early, 231.
Eastman, 213.
Eccles, 271.
Eccles, S., 77.
Eden, T. W., 32.
Edgeworth, F. M., 454.
Edinger, L., 73.
Edmunds, 151, 298.
Edwards, A. R., 17.
Eichhorst, 56.
Einhorn, 288, 416, 419.
Eisenlohr, 11.
Eliot, 108.
Elliott, 251.
Elsner, 34.
Elsner, H. L., 90.
Eltmuller, 178.
Engel, 11.
Engelman, 261.
English, 76.
Epstein, 257.
Erb, 88, 183.
Eross, 304.
Escat, 253.
Escherich, 250.
Eshner, 61.
Espinosa, 225.
Estay, 88.
Etheridge, J. H., 398.
Etienne, 153.
Eulenberg, 449.
Ewald, 244, 247, 269.
Ewart, 55, 100.
Exner, 115.

Fabre, 136.
Facklam, 125.
Fage, 148.
Falconer, 179.
Farquharson, 207, 215.
Faure, 151, 300.
Fayrer, Sir Joseph, 216, 217.
Fedtchenko, 474.
Feletti, 186.
Felsenthal, 12.
Fenwick, 132, 258.
Ferguson, 11, 206, 217.
Ferguson, A. H., 407.
Ferri, 295.
Fiebig, 8.
Field, 443.
Freux, 422.
Filaretopoulo, 318.
Filatoff, 185.
Filho, Moncorvo, 304.
Filleul, 196.
Fink, Surgeon-Major, 235.
Finkler, 92.
Finney, 69, 71.
Fischer, Louis, 475.
Fisher, H. M., 96.
Fisk, 23.
Fitz, 459.

Digitized by Microsoft®

Flexner, Simon, 202, 204.
Flint, Sr., Austin, 210.
Folker, H. M., 338.
Forbes, Charles, 224.
Forcheimer, 352.
Fordyce, J. A., 376.
Foster, 60.
Fothergill, 206, 214, 216, 217, 323.
Fournier, 384.
Fourriers, 414.
Fowler, S. B., 371.
Fox, 248.
Foxwell, Arthur, 95, 96.
Fraenkel, A., 11, 444.
Francis, 179.
Frank, 238, 449.
Franz, K., 74.
Frazier, C. H., 367.
Freint, 206.
Freire, Domingos, 8.
French, W. B., 17.
Freund, Leopold, 394.
Freyberger, 233.
Friedlander, V., 48.
Froelich, 234.
Frommel, R., 319.
Frudenthal, 115.
Fruitnight, 386.
Fruitnight, J. H., 301.
Fuente, 83.
Fuller, E., 376.
Furnivall, Percy, 32.
Fussell, 139.

Gage, 37.
Galen, 182.
Gallay, 214.
Gallors, 266.
Gannett, 190.
Garceau, 253.
Garden, 176.
Gardner, 265.
Garel, 117.
Garrigues, H. J., 32.
Gautier, 264.
Geddes, 206.
Geddings, 338.
Geddings, H. D., 339, 340.
Gemund, 34.
Gentile, Rocco, 305.
Georzensky, 157.
Giacomini, 210.
Giacosti, 265.
Giadoron, 182.
Gibbes, J. Murray, 67.
Gibson, 62.
Gieson, 188.
Gihon, A. L., 426.
Gilbert, 256, 257.
Gilbert-Fournier, 383.
Giles, 263, 315.
Gillespie, 429.
Gindel, 175.
Gingeot-Deguy, 95.
Girandon, 198.
Glinski, 33.
Glinsky, 213.
Godfrey, 179.
Goelet, A. H., 78.
Goodall, 142.
Goodrich, 262.
Gordini, 183.
Gordon, 143.
Goss, 173, 177, 179.
Gouzee, 182.
Gram, 58.
Grancher, 127.
Grandcourt, 249.
Grant, Dundas, 433.
Grant, Surgeon-Captain, 278.
Grasser, 202.
Grasset, 82, 136.
Graves, 178.
Grawitz, 330.
Greene, 146.
Gregor, 460.
Griesinger, 216.
Griffiths, A. D., 455.
Grimsdale, H. B., 319.
Gross, S. D., 199, 212.
Ground, 273.
Guck, 123.
Guépin, 249.
Guitéras, 249, 317, 333, 387.
Gullard, G. Lovell, 365.
Guth, 148.
Guttmann, Frederick, 54, 186, 187.
Guyon, 251.

Haas, 196.
Habermann, 474.
Halford, G. B., 228.
Hall, 81, 185.
Hanbury, 182.
Hankin, E. H., 73.
Hanks, 265.
Hansell, 149.
Hardaway, 255.
Hardie, 181.
Hare, F. E., 65.
Hare, H. A., 18, 24, 47, 314.
Harley, 186.
Harnsberger, S., 427.
Harovitz, 252.
Harrington, F. B., 76.
Harris, 207, 209, 234.
Hartle, 183.
Hartmann, 409.
Hasse, 26, 30.
Hatch, 119.
Havelburg, 334.
Hay, 179.
Head, George D., 364.
Heister, 205.
Helms, O., 396.
Helvetius, 205.
Hemmeter, 468.
Hendy, 187.
Henock, 272.
Henry, F. P., 363.
Hensel, 36, 303.
Herbet, 449.
Herman, 422.
Herschell, 474.
Herter, 35.
Heubner, 45, 447.
Heusser, 37.
Heymann, Felix, 473.
Hibbard, C. M., 51.
Hill, Leonard, 47.
Hinkel, F. W., 434.
Hinshelwood, 296.
Hinterhof, 213.
Hirsch, 202, 203, 216.
Hirshhorn, 229.
Hitchcock, C. W., 375.
Hobbs, 88.
Hochenegg, 154.
Hodenpyl, 37.
Hodgson, 231.
Hoffmann, 43.
Höfling, 262.
Holloway, W. G., 433.
Holstein, 318.
Holt, L. Emmett, 282, 283, 453.
Homolle, 172.
Hoover, F. P., 108.
Hothouse, 88, 89.
Howe, Lucien, 357.
Howland, 278.
Huber, 142.
Hubert, 245.
Huchard, 95.
Hughes, L. S., 46.
Hume, 190.
Hunter, 272.
Hunter, John, 136.
Hunter, W. K., 8, 261.
Hunter, William, 408.
Huntley-Peck, 278.
Hutchinson, J., 43, 185.
Hutinel, 249, 250.
Huxham, 214.

Ingersles, 136.
Ironside, 274.
Izlar, R. P., 358.

Jaboulay, J., 299.
Jaccoud, 59, 61.
Jackson, J. B., 470.
Jacob, 262.
Jacobi, 242, 247, 302.
Jacobi, A., 465.
Jacobus, 301, 302.
Jacquet, 150, 221, 293.
Jadassohn, 53.
Jaeger, 447.
Jamieson, 291, 292.
Jamison, 289.
Janeway, E. G., 379.
Jasiewicz, S, 12.
Jenkins, J. F., 16.
Jervis, P., 36.
Jewett, 265.
Joachin, 397.
Johson, 218.
Johnson, G. W., 430.
Johnston, 209, 212.
Johnston, Surgeon-Captain, 235.
Jones, 104, 157, 332.
Jones, A. A., 391.
Jonnesco, 151, 298.

Digitized by Microsoft®

Joret, 172.
Jousset, 448.
Jullien, 383.
Justus, 384.

Kachanovsky, 315.
Kallenberger, 238.
Kanthack, 207.
Kartulis, 202, 213.
Kassowitz, 259.
Keller, 267, 420, 460.
Kellogg, G. M., 157.
Kendall, 319.
Kerley, 272, 281.
Kerr, 132.
Ketcher, 68.
Kevin, 275.
Keyes, 388.
Khory, 178.
Kiernan, James G., 465.
King, 77, 104.
Kinnear, 191.
Kirikow, 462.
Kirt, 179, 377.
Kistler, 149.
Kitasato, 261.
Kittel, 328.
Kjeer, 155.
Klebs, 239.
Klebs, Edwin, 334.
Klein, 96, 136.
Knapp, 419.
Knepp, M. J., 21.
Knight, F. I., 45.
Koerfer, 190.
Kohn, H., 365.
Kolisko, P., 433.
Konig, 347.
Kontrebinsky, 145.
Koplik, 272, 284.
Kotschorowsky, 213.
Krafft-Ebing, 123, 126, 129.
Kramer, 146.
Krause, 448.
Krauss, 380, 449.
Krim, 236.
Kuh, E. J., 25, 29.
Kuhn, 468.
Kummell, 297.
Kuttner, 413.
Kyle, 151.

Labbé, 305.
Labit, 269.
Labusquière, 423.
Lacourt, 114.
Lacreda, 230.
Lacroix, 119.
Lalesque, 182.
Lambert, 109, 188, 262.
Lamprey, 180.
Lancaster, 279.
Landerer, 37.
Lang, E., 382.
Langdon, 36.
Lange, 178.
Lange, F., 406.
Langstaff, 133.
Lapersonne, 447.
Lasnet, 8.
Latouche, 195.
Laurie, 136.
Lavagna, 269.
Laveran, 13, 187.
Law, 135.
Lawrie, E., 178.
Leahy, 211.
Lebaudy, 184.
Le Dentu, 31.
Lee, Elmer, 61, 95.
Lefwich, R. W., 455.
Legay, 109, 122.
Legraine, 376.
Leistikow, 197.
Lejars, 300.
Lemoine, 22, 63, 138, 157, 213, 276, 349.
Lerchine, M. L. L., 46.
Leriche, 187.
Leroux, 125.
Lesage, 243.
Leuf, A. H. P., 311, 322.
Leute, 415.
Levacher, 448.
Levi, 184.
Levison, F., 330.
Levy, 92.
Lewin, 53.
Lewis, 76, 128, 190, 418.
Lewis, H. Edwin, 418.
Leyden, 11.
Lichtwitz, 234.
Liégeois, 294.
Liekasiewicz, 382.
Lilienthal, 392.
Limbeck, 364.
Lind, 182.
Lindsay, 137.
Lindt, 178.
Linnæus, 217.
Little, 185.
Locke, 210, 211, 212, 313.
Loin, 242.
Lopez, 259.
Lorenzin, 76.
Loudon, 125.
Lowe, 455.
Luff, 328.
Luff, A. B., 325.
Lupo, P., 87.
Lycett, 132.
Lyle, 435.
Lyman, 373, 414.
Lyon, 85.

Mabbott, J. Milton, 397.
Maberly, 213.
Macalister, J. D. L., 35, 454.
MacCallum, 14.
Mackenzie, 231.
Mackenzie, H., 294.
Maclagan, 178.
Maestro, 262.
Magnus-Levy, 443.
Maguire, J. C., 320.
Maisch, 254.
Makuen, 97.
Manges, Morris, 467.
Manson, 13, 14, 34, 166.
Manton, 82.
Maragliano, 153.
Marais, 205.
Marc, 181.
Marchant, 152, 299, 449.
Marfan, 123, 127, 129, 306.
Marianesco, 261.
Marie, 261.
Marino, 13.
Marlin, Sir S., 213.
Marquie, 232.
Marshall, 378.
Marshall, C. F., 378, 383.
Martin, 131, 153, 189, 190.
Martin, Ronald, 172.
Martindale, 208.
Massalongo, 124.
Massey, G. Betton, 46.
Mathysen, 184.
Mattison, 211.
Maud, A., 295.
Maurage, 174.
Mauray, 265.
Mayo, J. Thomas, 436.
Mays, T. J., 274.
McClennan, 348.
McCormick, H. G., 68.
McCoy, R. Y., 197.
McDonald, 265.
McGiffin, 192
McGrigor, 187.
McInnes, 199.
McKeown, W., 78.
McLean, 111, 208.
McPhedran, Alexander, 58.
Meek, J. W., 18, 20.
Mei, 124.
Melchior, 249.
Melchior, M., 74.
Meli, 183.
Melier, 334.
Mendy, 31.
Merrill, W. H., 290.
Metcalf, 146.
Meunier, 349.
Meyer, 123.
Meyers, 138.
Michael, 310.
Michaux, 31.
Mikhnevitch, 258.
Mikulicz, J., 416.
Miles, 86, 196.
Millard, 142.
Mitchell, J. F., 74.
Mohamed, 141.
Moizard, 277.
Moncorvo, 303, 304.
Mondini, Cesare, 471.
Monod, 69.
Monroe, 121.
Montgomery, D. W., 375.
Moore, J. W., 92, 178.
Moore, W., 36.
Moores, W., 376.
Morris, 221.
Morrison, 73.
Morrison, J. E., 466.
Morse, 108, 414.

Digitized by Microsoft®

Morse, E. L., 367.
Morse, J. L., 362.
Morse, S. F. B., 157.
Mortimer, 206.
Morton, 174.
Moseley, W. E., 347.
Mosetig-Moorhof, 349.
Mosler, 124.
Mott, Alexander, 157.
Mouat, 216.
Mueller, A., 229.
Muir, 93.
Müller, 178, 235.
Murray, R. D., 333, 337, 339.
Murrell, William, 77, 176, 208.
Murri, 19.
Musser, J. H., 42, 43.
Mya, 186.
Mygind, Holger, 96.

Naegeli, 46.
Naegeli-Akerblom, 149.
Napier, 123.
Nash, 185.
Nason, 150.
Neal, 220.
Nebelthau, 35.
Nelson, 290.
Nepveu, 148.
Neville, 258.
Nevins, 210.
Newburger, T. H., 73.
Newman, 48.
Newman, R., 331.
Newton, 185.
Nicolaier, 252.
Nicoll, 473.
Niemeyer, 206, 207.
Niessen, 379.
Noble, 250.
Nocard, 262.
Nolda, 198.
Nonne, 155, 444.
Noritsky, Sila, 196.
Norman, Seaton, 342.
Norton, Rupert, 13.
Northrup, 301.
Northrup, W. P., 454.
Notecourt, 324.

O'Connor, 217.
O'Dwyer, 191.
Olio, 186.
Oliver, 327.
Olivetti, 415.
Olney, Max, 62.
Openchowski, 236.
Oppenheim, 448.
Oppenheimer, Seymour, 476.
Ord, W. B., 470.
Orme, W. B., 6.
Ortega, 259.
O'Shaughnessy, 176, 179, 185, 214.
Osler, William, 16, 17, 49, 50, 65, 69, 70, 93, 94, 124, 204, 209, 214, 238, 272, 407, 448.
Ott, Isaac, 37, 64.
Otte, 316.
Ottinger, 220, 271.
Otto, 312.
Oudin, 305.
Overend, 127.
Overend, Walker, 44.
Owen, 297.

Packard, 190.
Padier, 185.
Page, 151.
Paget, O. F., 67, 68.
Palmer, 149.
Pancoast, J., 157.
Papazoglou, 196.
Park, 114.
Parkes, 216.
Parry, 346.
Parsons, 129.
Paterson, A. G., 50.
Patterson, 215.
Pauchet, 318.
Péan, 298.
Pearce, 209.
Pepper, William, 372.
Percival, 273.
Percira, 172, 176, 206.
Pestalozza, 305.
Peter, 92.
Peterson, F., 357.
Pezzoli, 312.
Pfaff, 248, 254.
Philadelphia Medical Journal, Editorial, 472.
Phillips, 189.
Phillips, Leslie, 32.
Phillips, Sidney, 377.
Phisalix, 230.
Pick, Ludwig, 414.
Piddington, 181.
Pilloy, 212.
Pincus, 245.
Piorry, 185.
Piso, 205.
Pitfield, 261.
Playfair, 206.
Poggi, 198.
Pollmann, L., 444.
Polozker, I. L., 476.
Pompoukis, 186.
Poncet, 300.
Pontoppidan, 53, 78.
Popoff, 180.
Poredi, 225.
Porenski, 186.
Porteous, J. Lindsey, 51.
Porter, 232.
Porter, C. B., 56.
Potter, 241.
Pouquinville, 175.
Power, d'Arcy, 195.
Pozzi, 263, 264, 265.
Price, Mordecai, 429.
Priestley, 124.
Pringle, 206.
Pritchard, Urban, 464.
Prout, 217.
Pruden, 67.
Pruitt, 181.
Prutz, 112.
Public Health Journal, 220.
Pujador, 144.
Pujol, G., 331.
Purslow, 132.

Quénu, 299.
Quincke, 312.
Quirogne, 186.

Rabinschek, 305.
Rachford, 155.
Ragland, 215.
Ramsay, 48.
Ramson, 328.
Ransom, W. B., 57.
Rappapart, 143.
Réclus, 82, 265.
Reed, A. Graham, 368.
Reed, Boardman, 375, 431, 468.
Reed, R. Harvey, 420.
Register, E. C., 17.
Reichert, 228.
Reid, R. A., 322.
Reid, S. T., 49.
Renai, 127.
Rendu, 42.
Reyerson, 122.
Rhoads, T. L., 34.
Rhymer, 11.
Rice, 346.
Riche, 296.
Richet, 279.
Riegel, 467.
Riehl, 327.
Riel, 186.
Ringer, 173, 175, 178. 208, 211, 212, 214.
Riseman, 126.
Ritchie, 93.
Ritter, 303.
Riva, A., 58.
Robb, H., 423.
Roberts, 176.
Roberts, J. B., 56.
Robertson, W. G. A., 397.
Robin, 150, 287.
Robin, A., 412, 441.
Robinson, 245, 256, 257.
Robinson, Beverly, 428.
Robinson, Mayo, 75.
Robinson, Samuel W., 79.
Robson, Mayo, 410.
Rochester, Delancy, 476.
Rode, E., 331.
Rodman, 129.
Roger, M., 143.
Rohé, G. H., 254, 255, 425.
Romme, 260.
Rosenbaum, S. M., 311.
Rosenheim, 247, 286.
Rosin, 348.
Roskam, 303, 304.
Ross, F. W. Forbes, 405.
Ross, Ronald, 13, 14.
Rossbach, 213.
Rosse, I. C., 393.
Rosseau, 318.

Digitized by Microsoft®

Rotch, 136, 138, 139, 140, 144, 282.
Roth, 173, 177, 207, 214, 448.
Rottger, 186.
Roullies, 123.
Routh, 131.
Roux, G., 229.
Rovsing, 250.
Rowland, 269.
Roxburgh, 185.
Royle, 185.
Rubel, 95.
Rubeska, 260.
Rubino, 376.
Ruchi, 173.
Ruffie, 10.
Ruge, 422.
Rugh, J. T., 370.
Rumbold, 117.
Rumpf, 43.

Saenger, 85, 156.
Sainsbury, 208, 212.
Sajous, C. E. de M., 25, 86, 171.
Sallden, 230.
Sambon, 189.
Samways, D. W. S., 424.
Sanarelli, 335, 338.
Sanger, 110.
Sangree, 280.
Sanson, 124.
Santori, F. S., 17.
Sarto, 421.
Sass, 98.
Sawyer, 177.
Schenck, 311.
Schieff, E., 394.
Schirlzern, 44.
Schlesinger, 450.
Schoengut, 213.
Schuller, 65.
Schultz, 155.
Schulz, 297.
Schuster, 270.
Schwalbe, Karl, 25.
Seabrooke, 370.
Seck, 156.
Seitz, 136, 141, 144.
Senn, 25.
Shapter, 187.
Shattock, 119.
Shattuck, F., 99.
Shaw, 275, 278.
Sheffield, 122.
Shoemaker, 425.
Shrady, 250.
Sickel, 191.
Simmonds, 113.
Simon, 122, 129.
Simons, E.M., 79.
Simpson, Alex., 321, 323.
Singer, 59.
Sinkler, 122, 128, 276.
Siredy, 63.
Skene, A. J. C., 351.
Skillern, 442.
Slawyk, 355.
Sloane, 205.
Smart, 164.
Smellie, 278.
Smith, 135, 181, 236.
Smith, Andrew H., 93, 96.
Smith, E. F., 345.
Smith, S. K., 165.
Smith, W.W., 211.
Smyth, 191.
Snow, 233.
Sobernheim, 33.
Sokoloff, 62.
Solberg, 96.
Solis-Cohen, 297, 369.
Solis-Cohen, S., 65.
Solomann, 75.
Solon, Martin, 175.
Souter, 196.
Souterian, 183.
Southworth, 246.
Soxhlet, 284.
Spalding, J. A., 295.
Sparr, 185.
Spencer, G. W., 315.
Spengler, Carl, 36.
Spiller, 128.
Spirak, C. D., 46.
Sprague, E. K., 338.
Squire, 317.
Stamm, C., 463.
Stanley, 126.
Stark, 461.
Steiner, 60, 111.
Sternhardt, 292.
Stengel, Alfred, 372.
Sternberg, Surgeon-General, 336.
Stevens, 210, 214.
Stevin, 179.
Stewart, 179, 181.
Stiles, 354.
Still, 466.
Still, G. F., 447.
Stillé, 207, 210.
Stillson, 116.
Stockman, Ralph, 24.
Stockwell, C. B., 133.
Stockwell, G. A., 134, 135, 174, 222, 228, 231.
Stoelzner, 446.
Stoker, 180.
Storck, J. A., 373.
Stout, 217.
Stowell, William L., 446.
Strauss, 468.
Stretton, 118.
Strickler, J. W., 355.
Sutton, E. M., 355.
Swinburne, G. K., 353.
Symes, 141, 242, 255.

Talbot, 464.
Talma, S., 462.
Tamplough, 396.
Tanner, 207.
Tarnier, 32.
Taylor, 145, 224.
Taylor, C. B., 135.
Taylor, James, 288.
Taylor, J. M., 305.
Tecce, 41, 108.
Tekontief, 113.
Telford-Smith, T., 49.
Temple, 263.
Testevin, 209.
Thayer, William Sydney, 471.
Theodor, 305.
Thibiege, G. M., 401, 403.
Thierry, 196.
Thomas, 184.
Thomas J. J., 50.
Thompson, 35, 146, 155, 185, 194, 196, 206, 301.
Thomson, 34, 312.
Thomson, John, 406.
Thomson, W. G., 410.
Thomson, W. H., 90, 94.
Thorpe, V. G., 211.
Tickell, 270.
Tobias, G. W., 330.
Tomaselli, 19.
Tompkins, 122, 128, 258.
Tongue, 218.
Toughy, J. F., 66.
Tracy, 75.
Trebby, 156.
Treulich, 174.
Triboulet, 58.
Tridone, 264.
Tritton, 179.
Troisfontaines, 381.
Trotter, 182.
Trousseau, 210.
Trudeau, E. L., 21.
Trumpp, 53, 250.
Truneck, 44.
Tscherning, 435.
Tschmarke, 86, 199.
Tuffier, 195.
Tumas, 264.
Tunnicliffe, 22.
Turnbull, Jr., Thomas, 365.
Turner, 262.
Tuttle, J. P., 267.
Tweedie, 180.
Twining, 206, 216.
Tyson, 18.
Tyson, James, 348.

Uhlenhuth, 310.
Unna, 294, 432.
Ussery, 101.

Valençon, 296.
Vander-Corput, 175.
Van Harlingen, 255.
Van Marter, 118.
Van Mons, 184.
Vanverts, 69.
Vater, 205.
Vaughan, Victor, 23.
Vedel, 215.
Vendeler, 332.
Vergely, 199.
Verhaegen, 289.
Vetlesen, 21.
Vidal, 63.
Videbech, 469.
Vigouroux, 296.
Vincenzo, 186.

Digitized by Microsoft®

Vinze, 226, 232.
Vivint, 24.
Vogel, 413.
Voigt, 47.
Volland, 24.
Von Erlach, H., 77.
Von Graefi, 295.
Von Leub, 114.
Von Mars, 423.
Von Voss, G., 57.
Von Ziemssen, 24.
Vulliet, 26.

Wagner, H. L., 438.
Walker, 251.
Walls, 251.
Walsh, 312, 449.
Walsh, Captain, 207.
Walther, 117, 195.
Walton, 197.
Ward, L. B., 66, 187, 206, 208.
Ware, Lyman, 386.
Waring, 172, 175, 176, 178, 179, 180, 181, 182, 183, 206, 210, 214, 215, 217, 224.
Warren, J. C., 109.
Wasdin, Eugene, 334, 342.
Washburn, J. W., 51.
Wathen, W. H., 464.
Watson, 98, 279.
Watu, 256.
Weaver, H. B., 20, 23.
Webber, 262.
Webster, 206, 211, 212, 218, 224.
Weichselbaum, 447.
Weigert, 58.
Weill, 303.
Weismayer, 94.
Weiss, 363.
Welch, 12, 13.
Wells, 351.
Wells, H. B., 352.
Wesenberg, G., 433.
West, 214.
West, C. C., 351.
West, J. P., 49.
Westcott, 208.
Wheeler, J. T., 66.
Whitaker, W. W., 377.
White, 254.
White, Hale, 208, 214.
White, J. C., 255.
White, J. H., 342.
White, Sinclair, 456.
Whitehead, 207.
Whitla, 179, 207, 213, 383.
Widal-Meslay, 414.
Wier-Mitchell, 228.
Wiglesworth, 144.
Wiglesworth, T. R., 209.
Wilcox, 115, 476.
Wilder, W. H., 466.
Wilkinson, 406.
Williams, 130, 131, 446.
Williams, C. E., 323.
Williams, C. W., 394.
Williams, Watson, 324.
Wilson, 156.
Windsor, 27.
Wingrave, Wyatt, 433.
Winkler, 379.
Winslow, R., 79.
Winternitz, 415.
Woldert, 17.
Wolf, 447.
Wollstein, 249.
Wood, 460.
Wood, H. C., 42, 47, 62, 72, 104, 207, 216, 297.
Woodhill, 207.
Woodhull, A. A., 33.
Woodson, R. S., 333.
Wrafter, Surgeon-Major, 221.
Wright, 217, 272.
Wright, A. E., 402, 405.
Wright, G. A., 28.
Wylie, W. Gill, 332.
Wyman, Walter, 61, 329, 343.
Wynter, W. Essex, 411, 462.

Yarr, M. T., 6.
Yarrow, H. C., 229.
Yeats, William, 26.
Young, J. W., 26.
Young, W. H., 317.

Zenoni, C., 93.
Zimmermann, 207.
Zittmanns, 385.

Digitized by Microsoft®

INDEX.

A model hospital for the insane. Albert L. Gihon. ... 425
Abdominal injuries ... 31
Diagnosis. Demons ... 31
Treatment. Le Dentu, Chauvel, Michaux ... 31
Abdomen, rare, penetrating wound of. Duer. ... 147
Abdominal section. H. T. Byford ... 344
Abdominal surgery. ... 81
Exploration and operation. Hall, Coe ... 81
Sutures. Réclus, Manton ... 82
Abortion. ... 31
Acetanilid as preventive of. Stephen Harnsberger. ... 426
Diagnosis. T. W. Eden ... 31
Treatment. Tarnier, Henry J. Garrigues. ... 32
Munro Campbell. ... 72
Aconite. Boru, Webster, Locke ... 211
Acid, carbolic. Amelung, Butler, Mattison ... 211
Acid, creasotic ... 211
Acid, salicylic. Cumbali, Campbell ... 211
Acne ... 32
Treatment. Leslie Phillips ... 32
Acromegaly ... 32
Pathology. Percy Furnivall, John N. d'Esterre ... 32
Acute otitis ... 108
Etiology. F. P. Hoover ... 108
Adenoid vegetations and deaf-mutism. E. Fayette Smith ... 345
Adenoids, post-nasal ... 108
Diagnosis. Eliot ... 108
Rice ... 345
Treatment. Eliot ... 108
Adhatoda. Khory ... 178
Albumin, significance of, in urine. Porter. 232
Albumosuria. Wood ... 459
Alcohol, use of. Clauston ... 232
Alginate of iron. William Maclennan ... 346
Alopecia. Black ... 266
Etiology ... 266
Prophylaxia ... 266
Alum. Eltmuller, Lindt, Muller, Lange, de Mera, Adair, Copeland ... 178
Biddle, Ringer ... 211
Amblyopia, rare. Campbell ... 147
Amenorrhœa ... 32
Etiology. W. L. Burrage ... 32
Alexander Simpson, Robert A. Reid ... 321
Treatment. Leuf, W. E. Fothergill, Alexander R. Simpson, C. Earle Williams, Lutaud ... 322
Ammonia salts in sucklings. Keller ... 266
Ammonium muriate. Pereira ... 172
Angina pectoris ... 41
Diagnosis. Tecce, J. H. Musser, H. C. Wood ... 41
Tecce ... 108
Pathology. Tecce ... 108
Treatment. J. B. Bradbury, W. W. Bostwick, Rumpf, J. H. Musser ... 42
Animal extracts. Parry, W. E. Moseley ... 346
Anthrax. ... 33
Pathology. Sobernheim ... 33
Antipyrine. Ardin-Delteil ... 212
Antitoxin and serum-therapeutics. Brieger and Uhlenhuth, Michael ... 310
Antitoxin poisoning. Morse ... 108
Aperients. Clapton, Chambers ... 217
Aphonia. ... 459
Treatment. Albert Abrams ... 459
Apiol. Waring, Joret, Homolle, Stockwell, Serré ... 172
Apocynum Cannabinum. A. A. Woodhull 33
Apoplexy ... 82
Treatment. Grasset ... 82
Aristol. Haas, McCoy, Walton, Cookman. 196
Arsenic. Chappie, Sir Ronald Martin, Adamson, M. Boudin, Roth, Ringer, Butler, Ricchi, du Cazal ... 172
Webster, Ringer, Sainsbury ... 212
Physiological action. Byrom Bramwell, Walker, Overend, Comby, Schirlzern, Czerny and Truneck ... 43
Arteriosclerosis and Epilepsy. Allen ... 108
Artificial feeding of infants. Kerley, Archives of Pediatrics; L. Emmett, Holt, Henry Dwight Chapin, Henry Hoplik, L. Duncan Bulkley, George Carpenter, Henri D. Rothschild ... 281
Gregor, Keller ... 460
Ascaris lumbricoides ... 83
Diagnosis. Fuente ... 83
Asthma ... 45
Etiology. J. C. Bowie ... 45
Treatment. J. C. Bowie, F. I. Knight ... 45
Beverly Robinson ... 427
Australian fever-tree. Bixby ... 178

Bacterium coli commune. Schenck ... 310
Barlow's disease ... 45
Diagnosis. L. S. Hughes, Naegli ... 46
Treatment. L. S. Hughes ... 46
Beberia. Maclagan, Waring, Godfrey, Dorward, Anderson, Falconer, Dempster, Cawasjee, Whitla, Goss, O'Shaughnessy, Stevin, Francis, Kirk, Hay, Tritton, Stewart ... 178
Bee- and wasp- stings. Marquie, Vinze ... 232
Beriberi (general review) ... 5
Diagnosis. W. J. Buchanan, William B. Orne, M. T. Yarr ... 5
Etiology. Lasnet, E. D. Bondurant ... 7
Pathology. W. K. Hunter ... 8
Nepveu ... 148
Symptoms ... 7
Crosthwait ... 232
Treatment. E. D. Bondurant, Domingos Freire ... 8
Crosthwait ... 233
Bismuth ... 212
Bladder, means of emptying the. Anderson ... 311
Blennorrhagic arthritis ... 347
Treatment. König ... 347
Blepharitis ... 33
Treatment. S. C. Ayres ... 33
Fage ... 148
Blood Examination. Editorial Journal of the American Medical Association, John Lovett Morse, F. P. Henry, Limbeck, G. D. Head, Thomas Turnbull (Jr.), Hans Kohn, G. Lovell Gulland ... 361

Digitized by Microsoft®

Boils, carbuncles, and felons..... 347
Treatment. L. Duncan Bulkley..... 347
Boils (furunculosis) 441
Treatment. Albert Robin, Skillern, L. Duncan Bulkley, Field, Burlureaux. 441
Boneset. Goss, Archie Stockwell..... 173
Bright's disease..... 347
Treatment. James Tyson..... 347
Bronchitis, acute 83
Treatment. Duncan, Duke, Charbonneau 83
Bronchitis, acute, in children. Barnett, Charbonneau 84
Bronchitis, chronic 85
Treatment. Lyon, Saenger, Dumas, Arthur Davies, Carrière..... 85
Burn, X-ray. J. P. Tuttle..... 267
Burns 86
Pathology. Tschmarko, Susuki, Sajous. 86
Treatment. Miles, Blanchard..... 86
Calaya. Maurage 174
Calcined magnesia. Vergely..... 199
Calcium phosphate. Blacklock, Cawasjee. 179
Calomel. Waring..... 179
Camphor. Waring, Copland..... 179
Biddle 212
Cancer (editorial) 25
Treatment by alcohol. Sajous..... 25
Treatment. Betton Massey, C. D. Spivak, M. L. L. Levchine, Despeignes 46
Carbolic acid. Treulich, Déclat, Desplats, Ringer, Wood..... 174
Carbozoate of ammonia. Clark, Popoff, Bose 180
Carbuncle 311
Treatment. Sol. M. Rosenbaum..... 311
Carcinoma 33
Pathology. Thomson 33
Carcinoma of lip..... 109
Operation. J. C. Warren..... 109
Cardiac dyspnœa 72
Etiology. A. Morrison..... 72
Cardiac sarcoma (primary)..... 109
Post-mortem. Lambert..... 109
Cardiac syphilis. I. Adler..... 428

Caries of the teeth and diseases of the stomach. Stark 460
Treatment. Charles D. Aaron..... 461
Castor. Sennertus 180
Castor-oil; epsom salt; opium. Tongue, Duffin, Broadbent 218
Centipede 226
Cerebellum, absence of one-half of..... 73
Post-mortem. T. H. Neubürger and L. Edinger 73
Cerebral hæmorrhage. Freyberger..... 233
Cerevisiæ fermentum. Stoker, Waring, Tweedie, Lamprey, Hugh Bennett.. 180
Chamomile (Roman). Morton, Cawaigee, Ringer 174
Chancre, extragenital 109
Etiology. Gagzow, Burwinkel..... 109
Charcoal. Calagus, Calvert..... 180
Chelidonine. Guth 148
Chigo 222
Chilblains 401
Symptoms. M. George Thibierge..... 401
Chilblains.
Etiology. Thibierge, A. E. Wright..... 402
Treatment. Thibierge, Brocq, M. Besnier, A. E. Wright, Chêron, C. Binz, F. W. Forbes Ross..... 403
Chloral-hydrate 198
Chloroform. Leonard Hill, H. C. Wood and W. S. Carter, Hobart A. Hare.. 47
Deterioration of chloroform. Newman and Ramsay 48
Pathological effects. Friedlander, K. Ajello 48
Prevention of accidents. Arnold..... 48
Treatment of collapse. S. T. Reid..... 49
Chloroform *vs.* ether (editorial). Sajous.. 71
Chlorosis 348
Treatment. Rosin..... 348
Cholagogues. Snow..... 233
Cholera 73
Prophylaxis. E. H. Hankin..... 73
Cholera infantum..... 241
Symptoms. Potter..... 241
Treatment. Symes, Jacobi, Loin, Durodie, Lesage..... 242
Cholera morbus 243
Treatment. N. S. Davis..... 243
Chorea 121
Adult chorea. Facklam, Collins, Krafft-Ebing, Bondurant, Stanley, Riseman 125
Etiology. Sinkler, Reyerson, Tompkins, Legay, Simon, Marfan, Krafft-Ebing, Guck, Meyer, Napier, Cornell, Priestley, Churton, Sanson, Bishop, Dakin, Mosier, Massalongo, Mei, Burr, Loudon..... 122
Legay 109
Symptoms. Monroe, Sheffield..... 121
Treatment. Overend, Grancher, Marfan, Renal, Spiller, Sinkler, Tompkins, Lewis, Collier, Krafft-Ebing, Bishop, Marfan, Simon, Rodman, Adams 127
W. Essex Wynter..... 462
Cinnamon. Avetoom..... 212
Cirrhosis, atrophic, of liver. S. Talma.... 462
Treatment 462
Cirrhosis, hypertrophic, of liver. Kirikow. 462
Cocaine-inebriety. T. D. Crothers..... 267
Symptoms 267
Treatment 267
Cocaine poisoning..... 148
Symptoms. Palmer..... 148
Treatment. Palmer..... 148
Coffee Arabica. Gindel, Dorput, Waring, Vander-Corput, Pouquinville, Martin-Solon 175
Colocynth. Webster, Goss, Locke..... 212
Colotomy and colostomy. König and Sonnenburg, Mosetig-Moorhof..... 348
Condurango. Lemoine..... 349
Congenital laryngeal stridor, or infantile respiratory spasm..... 462
Diagnosis. C. Stamm..... 462
Constipation 244
Complications. Hubert..... 245
Etiology. Cook, Ewald, Robinson, Pincus 244
Treatment. Editorial Journal des Prac-

Digitized by Microsoft®

Constipation.
ticiens, Southworth, Jacobi, Carrière, Boas, Ewald, Rosenheim, Fox, Pfaff, Boynton, de Holstein..... 245
Convulsions, infantile..... 109
Etiology. Sanger..... 109
Meunier 349
Corn. Pruitt..... 181
Corneal ulcers..... 149
Treatment. Hansell..... 149
Coryza of children..... 149
Treatment. Nageli-Akerblom 149
Creasote. Johnson..... 218
Creolin. Johnston..... 212
Cretinism. Wm. Osler..... 49
Prophylaxis. A. Gordon Paterson..... 50
Treatment. J. P. West, H. E. Drake-Brockman, T. Telford Smith, Wm. Osler 49
Croupous pneumonia..... 34
Symptoms. Elsner..... 34
Crusta lactea..... 149
Treatment. Kistler..... 149
Curettage of the uterus. W. H. Wathen.. 463
Curette, use of. Mordecai Price..... 428
Cusparia. Pereira, Williams, Wilkinson, Hancock, Winterbottom, Waring... 175
Cystitis 249
Diagnosis. Guépin and Grandcourt.... 249
Etiology. Shrady, Hutinel, Rovsing, Walker, Walls..... 250
Melchior 73
Prophylaxis. Noble..... 250
Symptoms. Guitéras, Hutinel, Wollstein 249
Treatment. Guyon, Elliott, Nicolaier, Medical News, Banzet, Harovitz, Colin, Bloom, Escat, Garceau..... 251
Varieties. Melchior..... 249

Deafness, inherited, syphilitic. Urban Pritchard, Arthur Cheatle..... 464
Degeneracy, stigmata. Talbot, Jas. G. Kiernan 464
Dermatitis venenata..... 253
Etiology. Rohé, White, Pfaff, Maisch.. 253
Symptoms. Rohé..... 254
Treatment. Rohé, Hardaway, Van Harlingen, J. C. White..... 255
Diabetes 87
Treatment. Pietro Lupo, Estay..... 87
Diablito Colorado. G. A. Stockwell..... 222
Diarrhœa, chronic. Allen A. Jones..... 390
Etiology..... 390
Treatment 390
Digitalis: its use and abuse (editorial). Stockwell 101
Dilatation of stomach..... 110
Diagnosis. W. H. Broadbent..... 110
Diphtheria 50
Pathology. J. J. Thomas, C. M. Hibbard 50
Treatment. Lindsey Proteous, J. W. Washburn, Trumpp 51
Disinfection. Gemund..... 34
Dislocation of the clavicle..... 34
Treatment. T. L. Rhoads..... 34
Displaced and adherent pregnant uterus.. 74
Treatment. K. Franz..... 74
Douche, nasal, abuse of. Lichtwitz..... 234
Douche, vaginal. E. C. Dudley..... 268
Dry labor. A. H. P. Leuf..... 311
Dysentery. W. S. Attygalle..... 349
Dysentery, amœbic form. Harris..... 234
Dysentery, tropical..... 234
Etiology 234
Treatment. Surgeon-Major Fink, Surgeon-Captain Johnston, Attygalls.. 235
Dysmenorrhœa 129
Etiology. Parsons, Williams, de Leon.. 129
G. Granville Bantock..... 391
Treatment. Cameron, Martin, Williams, Routh, Lycett, Fenwick, Dyers, Kerr, Connel, Purslow, Cadell, Langstaff, de Leon..... 130
G. Granville Bantock..... 391
Dyspepsia 286
Etiology. Rosenheim, Robin, Dessau... 286
Treatment. William Armstrong, James Taylor, Einhorn, Verhaegen..... 288
Dystocia (unusual). McLean..... 111

Ear, suppuration of middle..... 235
Operative treatment. Müller..... 235
Echinococcus of both lungs. Steiner..... 111
Eclampsia 111
Pathology. Prutz..... 111
Prevention of. Drejer..... 429
Eclampsia, uræmic..... 311
Symptoms. Thomson..... 311
Treatment. Thomson..... 312
Eczema 289
Etiology. William H. Merrill, Audry.. 290
Symptoms. L. Duncan Bulkley, Jamison 289
Treatment. Nelson, M. A. Brousse, Aubert, Jamieson, Steinhardt, Davezac, Jacquet, Besnier, Bulkley, Unna 290
Jacquet, Darezac, Block..... 149
Embalming crushed members. Jour. des Scien. Méd. de Lille..... 112
Emetics. Robin..... 150
Empyema of frontal sinus..... 112
Treatment. Bryan..... 112
Enteric fever 236
Symptoms. Openchowski..... 236
Enteroclysms. Judson Daland..... 349
Enuresis 150
Treatment. Nason..... 150
Epilepsy 112
Pathology. Cabitto..... 112
Treatment. Cabitto, Tekoutief..... 113
C. B. Stockwell..... 133
Epilepsy, plumbic. Rowland..... 268
Treatment 268
Ergot. Gross..... 212
Wright, Stout..... 217
Ergot in chronic malaria. A. Jacobi..... 465
Erysipelas. Lobit..... 269
Treatment 269
Erythema caused by primula acaulis..... 74
Etiology. Actandor..... 74
Symptoms 74
Erythema enematogenes (enema rash) in children. Still..... 465
Eucaine. Lilienthal..... 392
Europhen. Nolda..... 198

Digitized by Microsoft®

Eustachian inflammation..... 150
Etiology. Kyle..... 150
Symptoms and Diagnosis. Kyle..... 150
Treatment. Kyle..... 151
Exophthalmic goitre..... 151
Etiology. Valençon, Riche..... 296
Pathology. Edmunds..... 151
Symptoms. Page..... 151
H. Mackenzie, Liégeois, A. Maude, J. A. Spalding, Hinshelwood..... 294
Treatment. Deguy, Bertran, Owen, H. C. Wood, George W. Crary, Solis-Cohen, Schulz, Doyen, Péan, Edmunds, Jonnesco, Marchant, Abadie, Jaboulay, Chauffard and Quénu, Faure, Lejars, Poncet..... 296
Page, Jonnesco, Faure, Abadie..... 151
Bertram..... 350
Exophthalmic goitre in children..... 429
Treatment. Gillespie..... 429
Extraperitoneal rupture of bladder..... 74
Treatment. J. F. Mitchell..... 74
Extra-uterine pregnancy..... 74
Diagnosis. Mayo Robinson..... 74

Fallopian tubes, diseases of..... 350
Diagnosis. William H. Skene, A. J. C. Skene..... 351
Fat-necrosis..... 113
Etiology. Simmonds..... 113
Filaria ozzardi. Manson..... 34
Fracture..... 75
Treatment. E. A. Tracy..... 75
Fracture between base of cranium and bones of face. Slomann..... 75
Fracture of Elbow-joint..... 236
Treatment. Smith..... 236
Fracture of Patella..... 236
Treatment. Barker..... 236
Fracture of trachea. Park..... 113
Funis, short. Krim..... 236

Gall-stones..... 406
Diagnosis. A. H. Ferguson, Courvoisier, Osler, Steinthal..... 407
Etiology. William Hunter, Schroeder, Naunyn, R. H. Chittenden, Hartmann, M. Mignot, J. Cornillon..... 408
Symptoms. F. Lange, Osler, Wilkinson, John Thomson..... 406
Treatment. W. Gilman Thompson, Brockbank, Blum, Mayo Robson... 410
Ganglion..... 114
Treatment. Lacourt..... 114
Garlic. Pilloy..... 212
Garrya. Smith..... 181
Gastralgia. Ewald..... 269
Treatment..... 269
Gastric ulcer..... 411
Diagnosis. W. Essex Wynter, A. Robin, Vogel, Billard, Kuttner, Dieulafoy.. 411
Etiology. Lyman, Widal and Meslay.. 414
Prognosis. Editorial, Lancet; Ludwig Pock, Morse..... 414
Treatment. Von Leube..... 114
Dreschfeld..... 152
Fourrier, Olivetti, Fremont, Winternitz, Leube, J. Mikulicz..... 414

Gastro-enteritis..... 351
Treatment. Wells, Charlotte C. West.. 351
Gentian. Chavasse..... 181
Genu recurvatum..... 152
Etiology. Marchant..... 152
Pathology. Marchant..... 152
Treatment. Marchant..... 152
Genu valgum. Clarke..... 351
German measles..... 352
Diagnosis. Forchheimer..... 352
Glandular fever in children. Pfeiffer..... 392
Symptoms..... 392
Glaucoma, early recognition of, by a general practitioner. J. E. Morrison... 466
Treatment, Lavagna..... 269
Gnat and sand-fly..... 221
Golf. Irving C. Rosse..... 393
Gonorrhœa..... 352
Etiology. H. Brooks Wells..... 352
Treatment. G. K. Swinburne..... 352
Gout..... 324
Diagnosis. Watson Williams, A. H. Buck. 324
Etiology. Froelich, Nobecourt, Cornillon..... 324
Pathology. N. S. Davis (Jr.), A. P. Luff, C. S. Bull, Oliver, Riehl, Kittel 325
Treatment. Christian, Pontoppidan, Orville Horwitz..... 53
Luff, Ransom, Armstrong, H. C. Wood, George W. Tobias, F. Levison, von Noorden, Grawitz, R. Newman..... 328
Gonorrhœa, primary..... 312
Treatment. Pezzoli, Otto, Walsh..... 312
Gonorrhœa, secondary. Schuster,..... 269
Etiology of complications..... 269
Treatment..... 270
Gonorrhœal arthritis..... 152
Treatment. Maragliano..... 152
Gulancha. Stewart, Campbell, Hardie, Piddington, Waring, Cawasjee..... 181

Hæmatoma of vulva. Wettergren..... 153
Hæmophysis. English..... 75
Hæmorrhoids..... 114
Operative treatment. Alexander..... 114
Hair, functions of. Exner..... 114
Headache. W. H. Wilder..... 466
Headache, chronic..... 429
Treatment, editorial, Cleveland Journal of Medicine..... 429
Heart Disorders. Tickell..... 270
Treatment..... 270
Heart-wounds. Lewis..... 76
Hepatitis. James Cantlie..... 312
Treatment..... 313
Hernia..... 237
Etiology. Bishop..... 237
Treatment..... 237
Taxis. Bennecke..... 237
Radical operation. Deaver..... 237
Hernia, infantile umbilical. Eccles..... 270
Etiology..... 270
Treatment..... 271
Heroin. Dresser, Morris Manges..... 466
Hodgkin's disease (see also pseudoleukæmia)..... 34
Treatment. J. D. L. Macalister..... 34
Horse-fly..... 221

Digitized by Microsoft®

Hot-air treatment. C. H. Frazier, E. L. Morse, A. Graham Reed, S. Solis-Cohen, J. T. Rugh, Alice M. Seabrooke 366
Hydrocele 153
Treatment. Block, Etienne, Martin..... 153
Hydrocephalus, acquired 353
Etiology. Bruce and Stiles..... 353
Treatment. Bruce and Stiles..... 353
Hydrochloric acid in treatment of diseases of the stomach. Riegel, Kuhn, Strauss, Hemmeter, Boardman Reed 467
Hydrophobia—rabies 134
Prophylaxis. G. Archie Stockwell, Law, Smith, Dulles..... 134
Hymen, unruptured, in pregnancy. Albespy 468
Hypertrichosis. Eduard Schiff, Leopold Freund 393
Treatment 393
Hypertrophied prostate in the aged..... 430
Treatment. George W. Johnson..... 430
Hypnotics 115
Comparisons. Wilcox 115
Hysteria and pelvic disease. F. X. Dercum 354
Hysterical anorexia..... 35
Pathology. Nebelthau 35
Hysterectomy, sphincteric. Defontaine... 153

Ichthyol. Leistikow..... 197
Ileus, combined..... 154
Pathology. Hochenegg..... 154
Immunity. Thompson..... 35
Indicanuria 35
Pathology. Herter..... 35
Inebriety 35
Pathology. T. D. Crothers..... 35
Infantile diarrhœa 255
Etiology. Symes, Cumston, Robinson.. 255
Pathology. Baginsky, Gilbert..... 256
Treatment. Watu, Dessau, Gilbert, Epstein, Robinson, Bowles, Neville, Comby, Fenwick, Mikhnevitch, Tompkins, Crandall..... 256
Influenza (general review)..... 8
Aural complications. W. P. Eagleton, Gorman Bacon..... 10
Influence on birth-rate. Engel..... 11
Influenza and peripheral neuritis. Herman B. Allyn..... 11
Influenza during pregnancy. Démelin.. 10
Pulmonary complications. A. Fraenkel. 11
Symptoms. Jasiewicz..... 8
Treatment. Herman B. Allyn, Jasiewicz, Felsenthal, Bresler..... 12
Frudenthal 115
Inoperable angiosarcoma cured by electrolysis. Paul Videbeck..... 469
Insect-bites. Ottinger..... 271
Treatment 271
Insolation (sun-stroke; heat-stroke; Thermic fever; siriasis)..... 188
Etiology. Sambon, Colin, de Santi, Chevers, Phillips..... 189
Pathology. Lambert, Gieson, Martin, de Santi..... 188
Prophylaxis. Kinnear..... 191
Symptoms. de Santi..... 188
Treatment. Martin, Packard, Lewis, Gannett, Koerfer, Hume, Atkey, Sickel, Smyth, O'Dwyer, de Santi.. 190
Intestinal invagination of infants..... 154
Treatment. Cordna..... 154
Intestinal perforation..... 354
Diagnosis. E. M. Sutton..... 354
Intravenous injections. Bose, Vedel..... 215
H. A. Hare, G. H. Spencer..... 313
Introduction of the stomach-tube with the least possible embarrassment to the patient. Boardman Reed..... 430
Introductory notice..... 161
Iodine. Kotschorowsky..... 212
Ipecac. Piso, Marais, Sloane, Heister, Vater, Annesley, Twining, Ainslie, Geddes, Mortimer, Ballingall, Playfair, Balmair, Ferguson, Waring, Aitken, Niemeyer, Ward, Webster, Fothergill, Pereira, Thompson, Pringle, Cleghorn, Freind, Cambay, Stillé, Tanner, Goss, Farquharson, Roth, Woodhull, H. C. Wood, Surgeon-Major Harris, Surgeon-Captain Walsh, Kanthack, Caddy, Whitla, Docker, Cornish, Balmain, Zimmermann, Delioux, Maclean, Whitehead, Hale, White, Casvasjee, Biddle, Martindale, Westcott, Murrell, Ringer, Sainsbury, Butler, Pearce, W. W. Johnston, W. J. Buchanan, Testevin, T. R. Wigles-worth 205
Waring, Linnæus, Fothergill, Sir G. Baker 217
Iron. Marc, Corvisart, Waring..... 181
Ivy poisoning. Frank..... 238
Transmission 238
Treatment 238

Kala-azar. Giles..... 315
Diagnosis 315
Etiology 315
Kidney, effect of peptones and albumoses on 154
Pathology. Thompson..... 154
Kidney, movable. Eccles..... 271
Treatment 271
Kidney resection. Bloch..... 115
Kryophine. John H. Curtis..... 355
Kyphosis (juvenile) 76
Etiology 76
Treatment. Lorenzin..... 76

Labarraque's solution. Lalesque, Gouzée. 182
Morse 214
Lactophenin as hypnotic. Christiani..... 394
Laryngeal occlusion (spasmodic)..... 116
Etiology. Stillson..... 116
Larynx, carcinoma of..... 76
Diagnosis 76
Treatment. J. P. Clark and F. B. Harrington 76
Larynx, chronic stenosis of..... 155
Etiology. Kjeer..... 155
Treatment. Kjeer..... 155
Lead poisoning..... 88
Pathology. Erb..... 88
Symptoms. Hobbs, Hobhouse..... 88
Treatment. Hobbs..... 89
Leech. Stockwell..... 231

Digitized by Microsoft®

Lemons and Limes. Ferguson, O'Connor, Waring 217
Leukæmia 443
Diagnosis. Magnus-Levy, Benda, A. Fraenkel 443
Etiology. L. Pollmann 444
Pathology. Nonne 155
Nonne, Otto Barnick 444
Liver, rupture of the 35
Pathology. W. Moore 35
Treatment. Doyen 36
Locomotor ataxy 36
Pathology. Langdon 36
Lupus 315
W. Anderson 445
Treatment. Kachanovsky 315
Asselberg 155
Lupus erythematosus 431
Treatment. Unna 431

Magnesium sulphate. Trousseau, Giacomini, Stillé, Waring, Austin, Flint (Sr.), Webster, Locke, Goss, Stevens, Biddle, Nevins, Bahadurji, Cawasjee, Leahy, V. G. Thorpe, W. Wyatt Smith 209
Malaria. Medical News 315
Malaria (general review) 12
Diagnosis. William Osler, J. F. Jenkins, Bedford Brown, William B. French, A. R. Edwards, Woldert ... 16
Pathology. W. G. MacCallum, Opie ... 14
Prophylaxis. Bedford Brown 18
Transmission. Welch, Laveran, Rupert Norton, Ronald Ross, Bignami 12
Treatment. E. C. Register, A. Celli, F. S. Santori, Cardamatis 17
Malaria and the Cuban campaign (editorial). Sajous 162
Malaria and the Santiago expedition: a warning (editorial) 307
Malarial hæmaturia (general review) 18
Treatment. Editorial in Therapeutic Gazette. Dawson, Tyson, J. W. Meek, H. A. Hare, Baccelli, Bastianelli, Tomaselli, Murri 18
Malarial retinal hæmorrhage. Bassères ... 20
Mastitis 469
Treatment. J. B. Jackson 469
Measles 271
Diagnosis. Koplik 272
Slawyk 355
Infection. Henoch, Osler, Ashby, Wright, Douglas 271
Sequelæ. Editor 272
Treatment. Hunter 272
Meat poisoning. G. Wesenberg 432
Ménière's Disease 116
Etiology. Brown and Daland 116
Treatment. Brown and Daland 116
Meningitis 445
Diagnosis. Williams, W. L. Stowell, Stoelzner, Heubner 446
Etiology. Wolf, Lapersonne, G. F. Stille, Weichselbaum, Jaeger 447
Pathology. Lewellys, F. Barker 447
Symptoms. J. W. Carr, A. E. Davis 445
Treatment. Dinami 448
Mercuric bichloride. Lemoine 213
Mercurous chloride. Sir Ronald Marlin ... 213
Methylene-blue. Guttman, Mya, Porenski, Blatters, Röttger, Riel, Laveran 186
Migraine 155
Etiology. Barnes 155
Pathology. Barnes 155
Symptoms. Barnes 155
Milk as a culture-medium. J. W. Strickler 355
Milk: its absorption *vs.* its digestion. Bulkley 355
Monsoni avata. Maberly 213
Morphine poisoning. C. W. Williams 394
Treatment 394
Mosquito 219
Movable kidney 416
Diagnosis. Lewis 418
Etiology. H. Edwin Lewis 418
Symptoms. Lewis, Einhorn, Cordier, Leonard A. Bidwell 416
Treatment. Einhorn, Knapp, Keller, Cordier, Cramer, R. Harvey Reed, Lewis 419
Mudar. Durant 213
Myxœdema. W. M. Ord 470
Myxœdema in the negro 356
Symptoms. Berkley 356
Treatment. Berkley 356

Naphthalin poisoning. Otte 316
Naphthol compounds. Clark, Kartulis, Hinterhof, Glinsky, Whitla, Rossbach 213
Naragamia Alata. Bictre, Schoengut 213
Narcotine. O'Shaughnessy, Garden, Biddle, Murrel, Martindale, Westcott, Sir William Roberts 176
Waring, O'Shaughnessy 214
Nasal fractures. Garel 117
Naso-pharyngeal adenoids, danger of operation from, under chloroform. Frank Whitehill Kinkel 433
Nephritis of malarial origin. William Sidney Thayer 470
Nephritis, acute 272
Complications. Kerley 272
Treatment. Kerley, Black 272
Nephroptosis (movable kidney) 77
Treatment. Symons Eccles 77
Nerve-suture. Seck and Saenger 156
Neuralgia 448
Phrenic neuralgia. Diagnosis. Jousset. 448
Symptoms. Osler, Oppenheim, W. H. Brown 448
Treatment. Levacher, Krause, Krauss, Walsh, Eulenberg, Frank, Capitan, Marchant, Herbet 448
Neurasthenia 356
Etiology. Frederick Peterson 356
Newbouldia Lacois. Eastman 213
Night-sweats of phthisis 77
Treatment. Wm. Murrell 77
Nitrate of potassium. Poggi 198
Nitrates. Sawyer, Hunter, Burg 177
Nystagmus, acquired. Percival 272
Diagnosis 272
Remarks 273
Treatment 273

Digitized by Microsoft®

Obesity 36
Treatment. P. Jervis..... 36
Charrin, Guttmann..... 54
Occlusion of posterior nares (complete). Clark 117
Ocular neuralgia..... 89
Treatment. Markoff..... 89
The olive-tree. Giadoron, Hanbury..... 182
Operative peritonitis 77
Treatment. H. von Erlach..... 77
Ophthalmia neonatorium. Lucien Howe.. 357
Opium. Trotter, Lind, Waring, Joseph Brown 182
Orthoform. Kallenberger..... 238
Otomyasthenia 117
Diagnosis. Rumbold..... 117

Patenting of antitoxin (editorial)..... 456
Pelvic drainage. Ground..... 273
Pemphigus 357
Treatment. R. P. Izlar..... 358
Penis, amputation of. Guitéras..... 316
Pepper. Waring..... 183
Pepper-corn 183
Pericarditis 54
Diagnosis. Ewart, Wm. Broadbent..... 54
Treatment. J. B. Roberts, C. B. Porter.. 56
Peritonitis, cause of death in. Wilson.... 156
Pernicious anæmia..... 89
Autopsy. Coleman..... 89
Diagnosis. Byrom Bramwell, W. B. Ransom, G. von Voss, J. B. Coleman 56
Symptoms. Coleman..... 89
Treatment. Coleman..... 89
Blumenau, Alexander McPhedran.... 57
Pertussis. Carl Spengler..... 36
Treatment. Chateaubourg..... 156
Phenocoll. Cucco, Vincenzo, Cerna, Bernarda, Feletti, Olio, Quirogne..... 186
V. Cervello, Cesare Mondini..... 471
Phloridzina. De Konick, Van Mons, Mathysen, Labaudy, Leonhard, de Ricci 184
Phthisis 317
Treatment. Squire..... 317
Phthisis, cough. Jour. de Méd. de Paris.. 273
Treatment 273
Picric-acid poisoning. Walther..... 117
Picric, or carbazotic, acid. Erb, Clark.... 183
Walther, Latouche, Berger, Tuffier, d'Arcy Power, Miles, Thompson, Thierry, Fileul, Papazoglou, Sila Novitsky, Souter..... 195
Pilonidal sinus. Editorial Phila. Med. Jour. 471
Piperine. Hartle, Meli, Gordini, Blom, Soubeiran, O'Shaughnessy, Waring. 183
Plague 117
Characteristics. Arnold..... 117
Infection. Arnold..... 118
Pneumonia 238
Diagnosis. Osler..... 238
Pathology. J. W. Moore, Peter, Levy, Ribbert, Finkler, Dürck, Andrew H. Smith, Constanzo Zenoni, Osler, Royal Amidon..... 92
Prognosis. Osler, Weismayer..... 94
Symptoms. W. H. Thomson, Henry L. Elsner..... 90
Treatment. W. H. Thomson, Arthur Foxwell, Huchard, Gingeot and Deguy, Rubel, Elmer Lee, Baruch, Klein, H. M. Fisher, Royal Amidon, Solberg, Andrew H. Smith..... 94
Pneumonia, acute. T. J. Mays..... 273
Treatment 273
Pneumonia, croupous. Ironside..... 274
Abnormal temperature..... 274
Pneumonia in children..... 450
Etiology. Dürck..... 451
Symptoms. Schlesinger, Aufrecht..... 450
Treatment. H. D. Chapin, Baruch, L. Emmett Holt, F. M. Crandall, W. P. Northrup, Berg..... 451
Poisoning by coal-gas. Bolton..... 274
Diagnosis 274
Poisoning by stramonium. Shaw..... 274
Symptoms 274
Treatment 275
Potassium permanganate. Levi..... 184
Pott's disease of the spine..... 156
Treatment. A. H. Trebby..... 156
Progressive cirrhosis of the liver, bacteriology of. J. G. Adami..... 434
Prolapse of the fundus..... 472
Treatment. R. Abrahams..... 472
Prostatic enlargement 118
Treatment. Stretton..... 118
Prostatitis, chronic catarrhal. H. M. Christian 394
Diagnosis 394
Protargol. Editorial Edinburgh Medical Journal 395
Use of..... 395
Pruritis 421
Etiology. Sarbo, Herman..... 421
Prognosis. Dirner..... 421
Treatment. St. Luke's Hospital Reports, Ruge, Fieux, Herman, Van Mars, H. Robb, Labusquière, D. W. S. Samways, José Codina Castelvi, Shoemaker, Brocq..... 421
Pseudoleukæmia (see also Hodgkin's disease) 454
Symptoms. F. H. Edgeworth..... 454
Treatment. J. D. L. Macalister..... 454
Puerperal septicæmia..... 77
Treatment. King..... 77
Pulmonary tuberculosis. Tamplough..... 395
Treatment 395

Quassia. Thomas, Lettsom..... 184
Quinine. Waring, Clark, Douglass, Huxam, Butler, Osler..... 214
Quinine in malaria. Van Marter..... 118
Quinine-flower. Bigelow, Palmer, Newton, Padeir, Sparr, Hall..... 184

Raw meat. Druitt..... 218
Rectal prolapse. O. Helms..... 396
Treatment 396
Respiration, intra-uterine. Kevin..... 275
Rheumatism 275
Etiology. Bloch..... 275
Treatment. Lemoine..... 275
Rheumatism (general review)..... 58
Acute articular, bacteriology. Achalme, A. Riva, Triboulet and Coyon, Singer, Jaccoud..... 58

Digitized by Microsoft®

Rheumatism (general review)
Chronic articular rheumatism. Bäumler 64
Complications. Dickinson, Beach, Steiner, Bannatyne 60
Diagnosis, in children. Cheadle 59
Etiology. Chronic rheumatism. Chvostek 59
Treatment. Foster, Jaccoud, H. W. Crouse, Eshner, Cheadle, H. C. Wood, Max Olny, Sokoloff, Editorial in Therapeutic Gazette, Siredey, Lemoine, Vidal 60
Treatment of chronic articular rheumatism. Ott, Schüller 64
Rheumatism, acute articular. Lemoine 156
Rheumatoid arthritis 77
Treatment. G. A. Bannatyne 77, 317
Rhus-toxicodendron poisoning. W. H. Young 317
Right- and left- handedness 157
Physiology. George M. Kellogg 157
Ringworm of the scalp. Lyle 435
Rumination in man. Sinkler 276
Etiology 276
Treatment 276

Salicin. Blom, Pleischl, Goss, Roth 177
Saline injections. Pauchet 317
Scabies 318
Treatment. Holstein 348
Scalds and burns. J. Abbott Cantrell 192
Symptoms. Thompson 192
Treatment 195
Picric Acid. Walther, Latouche, Berger, Tuffier, d'Arcy, Power, Miles, Thompson, Thierry, Fileul, Papazoglou, Sila Novitsky, Souter 195
Aristol. Haas, McCoy, Walton, Cookman 196
Ichthyol. Leistikow 197
Europhen. Nolda 198
Thiol. Bidder, Giraudon 198
Chloral-hydrate 198
Nitrate of potassium. Poggi 198
Calcined magnesia. Vergely 199
Turpentine. McInnis 199
White-lead paint. Gross 199
General measures. Tschmarke 199
Scarlatina 136
Complications. Rotch, Dittmar, Alexieff, Symes, Seitz, Littlewood, Goodall 139
Diagnosis. Lindsay, Rotch, Lemoine 137
Infection. Ingersles, Klein, Grasset, Rotch, Seitz, Coxe 136
Prophylaxis. Coxe 137
Recurrence. Drake, Millard 142
Scarlatinal nephritis. Kontrebinsky 145
Symptoms. Meyers, Fussell 138
Treatment. Huber and Blumenthal, Gordon, Roger, Rappapart, Seitz, Rotch, Pujador, Wiglesworth, Alfaro 142
Scorbutus, infantile 300
Diagnosis. Crandall, Isaac Abt 301
Etiology. Jacobus, J. H. Fruitnight, American Pediatric Society 301
Symptoms. Crandall. Henry Ashby 300
Treatment. Jacobus, Baruch, Dessau, Abt 302
Scorpion. Stockwell, Espinosa, Banerjee, Poredi, Vinze, Joseph Benjamin 224
Scrofula 318
Treatment. Rousseau 318
Scrotal pruritus 118
Treatment. Brocq 118
Scurvy, infantile. Abt 276
Treatment. Moizard 277
Senile gangrene 157
Treatment. Jones 157
Serous pleurisy. Prosorowsky 396
Treatment 396
Sewer-gas and bacilli. Shattock 119
Silver nitrate. Stevens, Roth, Hale, White, Ringer, Butler, Fothergill, Sir G. Baker, Gallay, West, Dayabhai 214
Snakes. G. Archie Stockwell, G. B. Halford, Brenning, Weir Mitchell, Reichert 226
Sodium chloride. Willemin, Piorry, Hutchinson 185
Sodium sulphate; sodium and potassium tartrate. Biddle, Archintre 215
Sodium sulphites. Little 185
Somatose. Joachim 396
Felix Heymann 473
Sore nipples, the prevention of. J. Milton Mabbott 396
Soymida febrifuga. Waring, Roxburgh, Duncan, Breton, O'Shaughnessy 185
Spermatic cord, spontaneous torsion of. Barozzi 157
Spiders. G. Archie Stockwell, Davidson, Waring, Webster, Taylor, Charles Forbes 223
Spina bifida 473
Treatment. Nicoll 473
Stammering 96
Etiology. Holger Mygind, Makuen 96
Starch, salivary digestion of. W. G. Aitchison Robertson 397
Sterility 331
Etiology. G. Pujol, E. Rode, Vedeler, Benzler 331
Treatment. Jones, W. Gill Wylie 332
Sterilization of catgut by dry heat. J. H. Dauber 435
Stomach, dilation of 370
Diagnosis. Pepper, Stengle 372
Etiology. Pepper, Stengle 372
Symptoms. W. H. Broadbent, S. B. Fowler, Fenger 370
Treatment. J. A. Storck, Lyman, Broadbent, Boardman Reed 373
Stomach, diseases of 474
Treatment. Herschell 474
Strychnine. Nash 185
Strychnine: is its continual use unwise? Thomas J. Mays 435
Strychnos nux vomica. Waring 185
Substitutes for the cinchona alkaloids in the treatment of tropical malarial diseases 172

Drugs of the First Class.

Ammonium muriate. Pereira 172
Apiol. Waring, Joret, Homolle, Stockwell, Serré 172

Digitized by Microsoft®

Substitutes for the cinchona alkaloids.
Arsenic. Chapple, Sir Ronald Martin, Adamson, M. Boudin, Roth, Ringer, Butler, Ricchi, du Cazal..... 172
Boneset. Goss, Archie Stockwell..... 173
Calaya. Maurage..... 174
Carbolic acid. Treulich, Déclat, Desplats, Ringer, Wood..... 174
Chamomile (Roman). Morton, Cawaigee, Ringer..... 174
Coffee arabica. Gindel, Dorput, Waring, Vander-Corput, Pouquinville, Martin-solon..... 175
Cusparia. Pereira, Williams, Wilkinson, Hancock, Winterbottom, Waring..... 175
Narcotine. O'Shaughnessy, Garden, Biddle, Murrell, Martindale, Westcott, Sir William Roberts..... 176
Nitrates. Sawyer, Hunter, Burg..... 177
Salicin. Blom, Pleischl, Goss, Roth.... 177
Tartar emetic. Waring, Graves, Moore, Surgeon-Major E. Lawrie, Ringer.. 178

Drugs of the Second Class.

Adhatoda. Khory..... 178
Alum. Eltmuller, Lindt, Müller, Lange, de Mera, Adair, Copeland..... 178
Australian fever-tree. Bixby..... 178
Beberia. Maclagan, Waring, Godfrey, Dorward, Anderson, Falconer, Dempster, Cawasjee, Whitla, Goss, O'Shaughnessy, Stevin, Francis, Kirk, Hay, Tritton, Stewart..... 178
Calcium phosphate. Blacklock, Cawasjee..... 179
Calomel. Waring..... 179
Camphor. Waring, Copland..... 179
Carbozoate of Ammonia. Clark, Popoff, Bose..... 180
Castor. Sennertus..... 180
Cerevisiæ fermentum. Stoker, Waring, Tweedie, Lamprey, Hugh Bennett.. 180
Charcoal. Calagus, Calvert..... 180
Corn. Pruitt..... 181
Garrya. Smith..... 181
Gentian. Chavasse..... 181
Gulancha. Stewart, Campbell, Hardie, Piddington, Waring, Cawasjee..... 181
Iron. Marc, Corvisart, Waring..... 181
Labarraque's solution. Lalesque, Gouzée..... 182
The olive-tree. Giadoron, Hanbury.... 182
Opium. Trotter, Lind, Waring, Joseph Brown..... 182
Picric, or carbazotic, acid. Erb, Clark.. 183
Pepper. Waring..... 183
Pepper-corn..... 183
Piperine. Hartle, Meli, Gordini, Blom, Soubeiran, O'Shaughnessy, Waring. 183
Phloridzina. De Konick, Van Mons, Mathysen, Labaudy, Leonhard, de Ricci..... 184
Potassium permanganate. Levi..... 184
Quassia. Thomas, Lettsom..... 184
Quinine-flower. Bigelow, Palmer, Newton, Padeir, Sparr, Hall..... 184
Sodium chloride, Willemin, Piorry, Hutchinson..... 185
Sodium sulphites. Little..... 185
Soymida febrifuga. Waring, Roxburgh, Duncan, Breton, O'Shaughnessy... 185
Strychnos nux vomica. Waring..... 185
Strychnine. Nash..... 185
Sunflower. Filatoff..... 185
Sweet-flag. Thompson, Royle..... 185
Synthetics—antipyrine, acetanilid, Pampoukis, Harley..... 185
Phenocoll. Cucco, Vincenzo, Cerna, Bernarda, Feletti, Olio, Quirogne... 186
Methylene-blue. Guttman, Mya, Porenski, Blatters, Röttger, Riel, Laveran..... 186
Tannin. Leriche..... 187
Turpentine. Shapter, Ward..... 187
Zinc oxide. Hendy, Sir Gilbert Blanc.. 187
Zinc sulphate. Joseph Brown, McGrigor..... 187
Suppurative inflammation. Georzensky.. 157
Suppurative otitis..... 119
Treatment. Lacroix..... 119
Sweet-flag. Thompson, Royle..... 185
Synthetics—antipyrine, acetanilid. Pampoukis, Harley..... 185
Syphilis..... 375
Diagnosis. C. F. Marshall, E. G. Janeway..... 378
Etiology. Winkler, Niessen, J. G. Adami, M. Delore..... 379
Prognosis. Krauss, Campana..... 380
Symptoms. D. W. Montgomery, C. W. Hitchcock, Rubino, Legrain, Eugene Fuller, J. A. Fordyce, W. Morres, M. Dieulafoy, Sidney Phillips, Kirk, W. W. Whitaker, von Duhring..... 375
Treatment. Troisfontaines, Pediatrics, Manassein, Buret, Cartier, E. Lang, Dabney, Lukasiewicz, Whitla, C. F. Marshall, Jullien, Gilbert and Fournier, Justus, Fournier, Colombini and Gerulli, Cooper, Lyman Ware, Fruitnight, Ramón Guitéras, Keyes 397
Treatment (abortive). Pontoppidan.... 78
Syphilis, injections of mercury in. Filaretopoulo..... 318
Syphilis, infantile. Fedtchenko..... 474

Tachycardia..... 158
Etiology. Curtin..... 158
Tænia..... 98
Treatment. Carratu, Watson, Sass..... 98
Tannin. Leriche..... 187
Tannin and drugs containing tannic acid. Farquharson, Biddle, Butler..... 215
Tartar emetic. Waring, Graves, Moore, Surgeon-Major E. Lawrie, Ringer... 178
Tetanus..... 259
Diagnosis. Romme..... 260
Etiology. Burot, Kassowitz, Lopez, Ortega, Berlizheimer, Dayus, Rubeska. 259
Pathology. W. K. Hunter, Pitfield, Marinesco, Kitasato, Marie..... 261
Treatment. Engelman, Lambert, Goodrich, Webber, Turner, Chalmers, Jacob, Bristol, Medico-Chirurg. Jour., Nocard, Höfling, Maestro.... 261

Digitized by Microsoft®

Thiol. Bidder, Giraudon 198
Thyroid extract 36
Physiological action. Isaac Ott 36
Ticks 223
Tobacco-amblyopia 318
Symptoms. H. B. Grimsdale 318
Tonsillitis, acute 145
Etiology. Taylor 145
Treatment. Taylor, Kramer 145
Torticollis 78
Treatment. J. Collins 78
Toxæmia 78
Treatment. W. McKeown 78
Trional. Habermann 474
Tropical dysentery 202
Etiology. Kartulis, Councilman, Grasser, Simon Flexner, Hirsch 202
Prophylaxis. Osler, Flexner, Prieur, Bertrand, Archintre, Daniel 203
Treatment 205
Ipecac. Piso, Marais, Sloane, Heister, Vater, Annesley, Twining, Ainslie, Geddes, Mortimer, Ballingall, Playfair, Balmair, Ferguson, Waring, Aitken, Niemeyer, Ward, Webster, Fothergill, Pereira, Thompson, Pringle, Cleghorn, Freind, Cambay, Stillé, Tanner, Goss, Farquharson, Roth, Woodhull, H. C. Wood, Surgeon-Major Harris, Surgeon-Captain Walsh, Kanthack, Caddy, Whitla, Docker, Cornish, Balmain, Zimmermann, Playfair, Delioux, Maclean, Whitehead, Hale White, Casvasjee, Biddle, Martindale, Westcott, Murrell, Ringer, Sainsbury, Butler, Pearce, W. W. Johnston, W. J. Buchanan, Testevin, T. R. Wigleswortb 205
Magnesium sulphate. Trousseau, Giacomini, Stillé, Waring, Austin, Flint (Sr.), Webster, Locke, Goss, Stevens, Biddle, Nevins, Bahadurji, Cawasjee, Leahy, V. G. Thorpe, W. Wyatt Smith 209
Aconite. Boru, Webster, Locke 211
Acid, carbolic. Amelung, Butler, Mattison 211
Acid, creasotic 211
Acid, salicylic. Cumbali, Campbell .. 211
Alum. Biddle, Ringer 211
Arsenic. Webster, Ringer, Sainsbury. 212
Antipyrine. Ardin-Delteil 212
Bismuth 212
Camphor. Biddle 212
Cinnamon. Avetoom 212
Colocynth. Webster, Goss, Locke ... 212
Creolin. Johnston 212
Ergot.. Gross 212
Garlic. Pilloy 212
Intravenous injections. Bose, Vedel... 215
Iodine. Kotschorowsky 212
Mercuric bichloride. Lemoine 213
Mercurous chloride. Sir Ronald Marlin 213
Mudar. Durant 213
Monsoni avata. Maberly 213
Naragamia alata. Bictre, Schoengut .. 213
Newbouldia lacois. Eastman 213
Naphthol compounds. Clark, Kartulis, Hinterhof, Glinsky, Whitla, Rossbach 213
Narcotine (anarcotine). Waring, O'Shaughnessy 214
Quinine. Waring, Clark, Douglass, Huxam, Butler, Osler 214
Silver nitrate. Stevens, Roth, Hale White, Ringer, Butler, Fothergill, Sir G. Baker, Gallay, West, Dayabhai 214
Labarraque's solution. Morse 214
Sodium sulphate; sodium and potassium tartrate. Biddle, Archintre .. 215
Surgical measures. Patterson, Stephan 215
Tanin and drugs containing tannic acid. Farquharson, Biddle, Butler .. 215
Turpentine. Copland, Waring 215
Veratrum viride. Ragland, Waring .. 215
Zinc salts 215
Tropical diarrhœa. Parkes 216
Etiology. Wood, Fothergill, Parkes, Annesly, Twining, Griesinger, Mouat, Hirsch, Sir Joseph Fayrer 216
Treatment. Fayrer, Fothergill, Prout .. 217
Aperients. Clapton, Chambers 217
Castor-oil; epsom salt; opium. Tongue, Duffin, Broadbent 218
Creasote. Johnson 218
Ergot. Wright, Stout 217
Ipecac. Waring, Linnæus, Fothergill, Sir G. Baker 217
Lemons and limes. Ferguson, O'Connor, Waring 217
Other remedies. Webster, Goss 218
Raw meat. Druitt 218
Zinc oxide. Brakenbridge 218
Tuberculosis, exanthemata of. Boeck 436
Tuberculosis, infantile 474
Diagnosis. Louis Fischer 474
Treatment. Louis Fischer 475
Tuberculosis of joints. Briezel 277
Treatment 277
Tuberculosis of the larynx 37
Treatment. Donelan 37
Tuberculosis of the lungs (general review) 20
Etiology. H. B. Weaver 20
Diagnosis. J. P. Arnold, E. L. Trudeau, Vetlesen, Bergonié, Disen, Mark J. Knepp 21
Treatment. E. Lemoine, Clifford Beale, Chaplin and Tunnicliffe, St. Clair Thomson, Fisk, H. B. Weaver, Victor Vaughan, Chapteloube, Descomps, Roullies, Ralph Stockman, H. A. Hare, von Ziemssen, Volland, Vivant 22
Tuberculosis of the lungs 37
Etiology. Abbott 37
Diagnosis. Gage 37
Treatment. Landerer, Heusser 37
Tuberculosis of the middle ear. Seymour, Oppenheimer 475
Tuberculosis, pulmonary 476
Treatment. Delancy, Rochester 476
Turpentine. Shapter, Ward 187
McInnis 199
Copland, Waring 215

Digitized by Microsoft®

Typhoid fever (general review)..... 65
Diagnosis of perforation. Finney..... 69
Diarrhœa and perforation. Wm. Osler, Finney 69
Pathology. Osler..... 65
Surgical treatment. Monod and Van Verts, John B. Deaver, Finney..... 69
Treatment. Osler, F. E. Hare, S. Solis-Cohen, J. T. Wheeler, J. F. Toughy, Duchenne, A. J. Downes, J. Murray-Gibbes, Ketcher, Owen F. Paget, Herbert Bramwell..... 65
Typhoid fever..... 37
Diagnosis. Brill..... 38
Dietetics. A. G. Barrs, Frederick Shattuck, William Ewart, Ussery..... 98
Pathology. Hodenpyl..... 37
Treatment. Henry W. Bettman..... 397
Typho-malarial fever. A. Crombie..... 397

Ulcer of the stomach and climate. Hatch. 119
Ungual phalanx, dislocation of. Huntley-Peck 277
Urethral stricture. Howland..... 278
Treatment 278
Urotropin. Wilcox..... 476
Urticaria with recurrent hæmatemesis. Chittenden 278
Treatment 278
Uterine carcinoma. J. H. Etheridge..... 398
Treatment 398
Uterine disease..... 78
Etiology. L. D. Bulkley..... 78
Treatment. E. M. Simons..... 79
Uterine fibroid..... 78
Treatment. A. H. Goelet..... 78
Uterus, double. Kendall..... 319
Uterus, rupture of. Donald, Metcalf..... 146

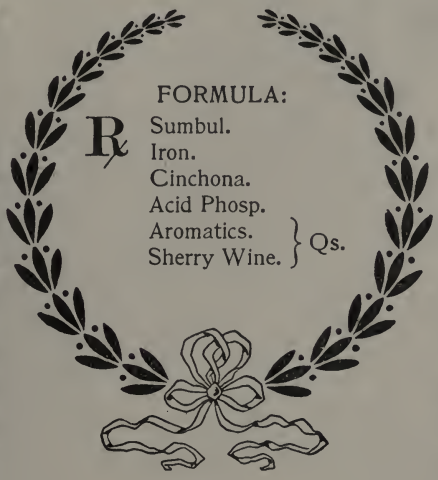
Vaccination. Lowe, A. D. Griffiths, P. R. Cooper, R. W. Lefwich, Sinclair White 455
Vaginitis, gonorrhœal..... 476
Treatment. I. L. Polozker..... 476
Varicose veins. Cumstom..... 398
Vegetarianism. Surgeon-Captain Grant.. 278
Venomous bites and stings..... 219
Mosquito 219
Prophylaxis. Public Health Journal. 219
Treatment. Neal, Ottinger, Morris, Brocq, Jacquet, Surgeon-Major Wrafter 220
Gnat and sand-fly..... 221
Horse-fly 221
Diablito Colorado. G. A. Stockwell.... 222
Chigo 222
Vivigagua. G. Archie Stockwell..... 222
Ticks 223
Spiders. G. Archie Stockwell, Davidson, Waring, Webster, Taylor, Charles Forbes 223
Scorpion. Stockwell, Espinosa, Banerjee, Poredi, Vinze, Joseph Benjamin 224
Centipede 226
Snakes. G. Archie Stockwell, G. B. Halford, Brenning, Weir Mitchell, Reichert 226
Treatment. G. Roux, Hirschhorn, A. Mueller, Joshua Duke, Banerjie, H. C. Yarrow, Lacerda, Sallden, Calmette, Phisalix, Bertrand, Hodgson, Mackenzie, Early..... 228
Leech. Stockwell..... 231
Bee- and wasp- stings. Marquie, Vinze. 232
Veratrum viride. Ragland, Waring..... 215
Vivigagua. G. Archie Stockwell..... 222
Vomiting in pregnancy..... 263
Pathology. Pozzi, Temple, Hedra, Tumas, Giles, Bue..... 263
Symptoms. Pozzi..... 263
Treatment. Pozzi, Gautier, Tridone, Giacosti, Réclus, Gardner, Mauray, Hanks, Jewett, Cameron, McDonald, Gallois 264
R. Frommel..... 319
Vomiting, intractable. Thompson, Greene 146
Vomiting of uterine origin..... 278
Pathology. Shaw..... 278
Treatment. Shaw, Watson..... 278
White-lead paint. Gross..... 199
Whooping-cough 303
Early diagnosis in. Henry Lewis Wagner 437
Etiology. Weill, Hensall and Czaplewski 303
Treatment. Roskam, Moncorvo, Filho, Eross, J. Madison Taylor, Theodor, Rabinschek, M. E. Doumer, Sidney A. Bontor, Marfan, Arthur H. Bigg. 303
Lancaster 279
Wine and cirrhosis. Richet..... 279
Wounds 79
Sequelæ. Samuel W. Robinson..... 79
Treatment. R. Winslow..... 79

Xanthoma 319
Treatment. James C. Maguire..... 319
X-ray blindness. Sangree..... 280

Yellow fever..... 333
Bacteriology. Havelburg, Sanarelli, Surgeon-General Sternberg, E. Klebs... 334
Diagnosis. John Guitéras, S. E. Archinard and R. S. Woodson, R. D. Murray, Eugene Wasdin, H. R. Carter, Melier, Edwin Klebs..... 333
Pathology. Klebs..... 239
Cuban Commission of Mississippi, R. D. Murray..... 337
Post-epidemic disinfection. Surgeon-General Walter Wyman..... 343
Prognosis. Geddings..... 338
Prophylaxis. H. R. Carter, W. F. Brunner, Wasdin, Seaton, Norman, J. H. White 340
Treatment. Sanarelli, E. K. Sprague, H. M. Folkes, H. D. Geddings, R. D. Murray 338

Zinc oxide. Hendy, Sir Gilbert Blanc.... 187
Brakenbridge 218
Zinc salts..... 215
Zinc sulphate. Joseph Brown, McGrigor.. 187

Digitized by Microsoft®



TONO SUMBUL CORDIAL

(W. R. WARNER & CO.)

Comprises a combination of tonics in active form, which, taken under the supervision of the physician, will cause patients to gain in strength and weight.

As will be seen, it does not contain Coca or any ingredient which might induce a drug habit, but is a superior tonic, used to advantage and discontinued with no after effects.

It is palatable, and especially serviceable where the stomach of the invalid rebels at a nauseating preparation.

SEE THAT YOU GET THE ORIGINAL.

SUPERIOR TO PEPSIN OF THE HOG.

INGLUVIN A Powder—prescribed in the same manner, doses and combinations as Pepsin.

A Specific for Vomiting in Pregnancy.

PREPARED ONLY BY

W. R. WARNER & CO.

PHILADELPHIA.
NEW YORK.
CHICAGO.

ELIXIR CHLORALAMID

AN EFFICIENT AND SAFE HYPNOTIC.

Each Tablespoonful contains 15 grains Chloralamid.

The large number of physicians who have recorded their experience with **Chloralamid** agree that it is a potent hypnotic free from any depressing action on the heart. **Elixir Chloralamid** presents the remedy in most suitable form for administration. In doses from 15 to 45 grains it induces sound sleep lasting from 5 to 8 hours.

Chloralamid is official in the German Pharmacopoeia and is endorsed by Prof. Chas. L. Dana, Prof. John V. Shoemaker, Dr. H. C. Wood, Dr. David Cerna, Dr. John Aulde, Prof. Chas. H. Steele, Prof. R. W. Wilcox, and others.

LEHN & FINK, Manufacturing Chemists, NEW YORK.

Digitized by Microsoft®

NOTES AND COMMENTS.

THE F. A. DAVIS COMPANY, Publishers. GEO. B. CREVELING, Business Manager.

Hawaii and the Philippines.—Send four cents (in stamps) for an illustrated booklet issued by the Chicago, Milwaukee & St. Paul Railway, the direct route across the American Continent to the new Transpacific possessions of the United States. Full of latest reliable information and valuable for reference. Can be used as a text-book in school. Address, John R. Pott, District Passenger Agent, Williamsport, Pa.

Kryofine: an Excellent Remedy.—Kryofine has a very beneficial effect in influenza, pneumonia, and other affections of the respiratory passages. It is a powerful anodyne and reliable antipyretic. In typhoid fever it is a most desirable symptom-remedy, decreasing temperature and relieving headache, restlessness, and insomnia. In the acute febrile diseases of childhood kryofine reduces temperature and relieves pain and restlessness.

A Valuable Ferruginous Preparation.—The current of opinion now sets strongly in favor of the use of organic combinations of iron instead of the older mineral salts. "Hæmaboloids" is the title of a complex preparation made by the Palisade Manufacturing Company, of Yonkers, N. Y. Hæmaboloids contain the nucleo-albumin of certain green vegetables and legumens, such as barley, lentils, spinach, etc., which are rich in both iron and phosphorus. In addition to these constituents it is reinforced by the addition of bone-marrow and beef-peptones. The composition of hæmaboloids renders it an admirable agent in the treatment of anæmia, chlorosis, derangements of the nervous system, and, in short, all pathological conditions which depend upon a deficiency of iron and phosphorus.

The Doctors Factotum. — Under the above title the associated pharmacal manufacturing firms of Yonkers, N. Y., issue a bimonthly journal which contains much useful information concerning their own products, together with interesting general matter more or less closely connected with the practice of medicine.

Sulphydrol in Rheumatism and Uric-Acid Diathesis.—The chief danger of rheumatism lies in the cardiac complications. On account of their depressant action the salicyl compounds are used with misgivings, especially in myocarditis, where the muscular structure of the heart is involved. Careful practitioners are, therefore, prepared to welcome the introduction of a remedy which is alterative and tonic and not depressant. This is found in sulphydrol, which is efficient in subacute, acute, and chronic rheumatism, and also in the train of morbid manifestations due to the presence of uric acid in the blood and tissues. For full information our readers should address The Sulphydrol Pharmacal Company, of Detroit, Mich.

Digitized by Microsoft®

℞ Ung't. Resinol ℥i—iii.

THOROUGHLY EFFICIENT AS AN

ANTIPRURITIC. ANTISEPTIC,
LOCAL ANTIPHLOGISTIC & SKIN NUTRIENT

And is now being successfully used and prescribed by over 40,000 PHYSICIANS in the United States and Canada

For Eczema, Erysipelas, Pruritus and all Itching, and Inflammatory Skin Diseases.

℞ Elix. Cascanata ℥iv—x.

LAXATIVE, ALTERATIVE, ANTACID AND TONIC.

Stimulates the elimination of effete matter and restores the normal alkalinity of the blood.

A specific for habitual constipation and the digestive derangements resulting therefrom.

RESINOL CHEMICAL CO., = Baltimore, Md.

When a Physician

has learned by experience that LACTOPEPTINE is almost a specific in the treatment of digestive disorders it's a "dangerous experiment" to allow the substitution of any of its imitations when LACTOPEPTINE is prescribed. Dangerous to the patient, whose welfare may depend upon its prompt effects; dangerous to the physician, whose reputation may suffer by failure to afford relief; dangerous to the pharmacist should either patient or physician learn of the imposition practiced. Avoid these dangers, Doctor, by insisting that the genuine LACTOPEPTINE is dispensed when prescribed. It has never been successfully imitated.

Perry Patetic — They say a man enjoys restin' a whole lot better after a good hard day's work.

Wayworn Watson — Well, fer all I know, it may be so; but I ain't 'round tryin' dangerous exper ments.

THE NEW YORK PHARMACAL ASSOCIATION,
YONKERS, N. Y.

Samples upon request.

Digitized by Microsoft®

Notes and Comments (continued).

Maltzyme : an Admirable Nutrient.—Maltzyme is a diastasic essence of malt containing an exceptionally large proportion of diastase. It is a valuable nutrient remedy in all debilitated conditions of the system and especially indicated where there is failure in the digestion of starchy foods. Maltzyme is prepared by The Malt-Diastase Company, No. 1 Madison Avenue, New York, to whom inquiries may be addressed. Maltzyme may be obtained plain or put up in conjunction with codliver-oil, cascara sagrada, and hypophosphites. It is, therefore, suited to fulfill a multiplicity of indications in the treatment of diseased states.

Check the Spread of Typhoid Fever!—Innumerable are the impressive and melancholy lessons which mankind has received regarding the importance of disinfection of the dejecta in typhoid fever in order to prevent its spread. For this purpose we know of nothing superior to Platt's chlorides and can corroborate the words of Dr. Frank Parsons Norbury in an article on "Typhoid Fever in Children." The bed-pan should be scalded after using, and all linen, napkins, towels, etc., which have been soiled by the patient should be disinfected.

Laryngeal, or Winter, Coughs.—In acute attacks of laryngeal, or winter, cough, tickling and irritability of the larynx, Dr. Walter M. Fleming highly extols the use of a 5-grain tablet containing 4 $^{3}/_{4}$ grains of antikamnia and $^{1}/_{4}$ grain of codeine sulphate. The tablet is taken an hour before retiring and repeated hourly until the irritation is allayed. It is allowed to dissolve slowly in the mouth and the saliva is swallowed.

A Clear Proof of the Value of Unguentine.—A more convincing illustra-

"FACTS AND SUGGESTIONS," AN INTERESTING BOOKLET, MAILED FREE ON APPLICATION.

Is Life Worth Living?

This question is often asked by those who are drawing small dividends of health and enjoyment. When the machinery is out of order, comfort and pleasure are unknown.

Goldbeck's Malt Extract

will make life worth living by restoring the proper functions. It is a clean-tasting appetizer, a richly-nutritious tonic, with no unpleasant effects or reaction of any kind. Superior in medicinal qualities, it is sufficiently palatable to please the most fastidious patient.

Incidentally, the best malt obtainable.

JOHN F. BETZ & SON, Limited,
Crown and Callowhill Sts.,
PHILADELPHIA, PA.

50 YEARS' EXPERIENCE

PATENTS

TRADE MARKS
DESIGNS
COPYRIGHTS &C.

Anyone sending a sketch and description may quickly ascertain our opinion free whether an invention is probably patentable. Communications strictly confidential. Handbook on Patents sent free. Oldest agency for securing patents.

Patents taken through Munn & Co. receive *special notice*, without charge, in the

Scientific American.

A handsomely illustrated weekly. Largest circulation of any scientific journal. Terms, $3 a year; four months, $1. Sold by all newsdealers.

MUNN & Co. 361 Broadway, **New York**
Branch Office, 625 F St., Washington, D. C.

Digitized by Microsoft®

THE baths to be obtained in this institution consist of the Nauheim, or Schott, bath for the various forms of Heart Disease.

Dry Superheated Air Cylinder for Rheumatism, etc., and Salt Rub Baths.

The various forms of Electricity and Massage are employed as indicated.

Rotherham House Hospital

(ESTABLISHED IN 1887),

54, 56, and 58 Isabella Street, Toronto, Canada.

A private institution for the treatment of Diseases of the Nervous System (both sexes), Abdominal Surgery, Rheumatism, and Heart Disease.

Address, HOLFORD WALKER, M.D.

SNOW'S GRAPE JUICE

Is a perfect food; a nerve feeder;
a rich blood maker;
a healthful and delicious beverage for the well;
an invigorating and sustaining liquid diet for the sick;
and nature's best tonic for the convalescent.

SNOW'S GRAPE JUICE

IS PUT UP IN THREE BRANDS.

ESPERANZA (Dry). HYGEIA (Sweet). SNOW'S (Heavy).

NO ALCOHOL. NO ANTISEPTICS.

See that your dealer gives you SNOW'S. That is the guarantee of purity.

John S. Linsley, M.D., of New York City, says: "The ESPERANZA and HYGEIA brands of Grape Juice are both food and drink for the well or sick, and indispensable in a perfect dietary."

A Pint Bottle and Samples FREE to any Physician or Church who will pay express.

SNOW GRAPE JUICE CO., Penn Yan, N. Y.

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®

Notes and Comments (continued).

tion of the value of an application was never given than that communicated by Dr. C. H. B. Gile, of Falum, Kan. He relates the case of a woman who had been afflicted for five years with tuberculosis of the joints of the hand. The joints were all open and the bone was exposed. Amputation had been suggested. By the continued application of unguentine for several months the hand entirely healed, all the pain had ceased, and the general health had become excellent. Unguentine is made by the Norwich Pharmacal Company, of Norwich, N. Y.

Stammering and Stuttering.—These defects are extremely mortifying to the sufferers and, in fact, exercise a deleterious influence upon mental development. The most signal success in the management of these troublesome disorders has been obtained by Mr. Edwin S. Johnston, of 1033 Spring Garden Street, Philadelphia. At that address Mr. Johnston has established an institute where he has had remarkably good results in the treatment of these infirmities.

A Line of Reliable Products.—The esteemed and enterprising firm of Schering & Glatz, of No. 58 Maiden Lane, New York, are indefatigable in supplying the medical profession with literature descriptive of the new products which they handle. The various specialties of this house are all of first-class quality and reputation. From a number of their publications which have recently reached us we have gathered much interesting information relative to the silver preparations introduced by Dr. B. Crédé, of Dresden, for internal and external use in a host of suppurative and infectious maladies. Another abstract relates to Urotropin, an efficient urinary antiseptic, of service in all suppurative disease of the genito-urinary tract. Alpha- and beta- eucaine are the subject of a pamphlet which gives us the latest experience in regard to those local anæsthetics and discusses their respective merits. The latest additions to our armamentarium in dealing with certain disorders of the skin are communicated in papers devoted to the properties of kresamin and xeroform. The virtues of duotal and creosotal in typhoid fever, rheumatoid arthritis, and a number of infectious disorders are contained in a record of the observations of authoritative writers. A final sheet refers to the ingenious methods by which they, in Schering's formalin-lamp and Schering's formalin-disinfector, have utilized the valuable dis-

Platt's Chlorides,

The True Disinfectant.

An odorless, colorless liquid; powerful, safe, and cheap; indorsed by over 23,000 physicians; sold everywhere in quart bottles only. Prepared only by

HENRY B. PLATT,

Platt Street, New York.

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®

Notes and Comments (continued).

infectant properties of formalin. All these and other papers containing practical information can be had on application to the firm. We should not omit to mention a paper calling attention to the merits of Stiefel's medicinal soaps, which are of undoubted excellence in many cutaneous disorders.

"A New Created World."—If you leave home for an outing, go where you will find almost literally a new world. Such a spot is Yellowstone Park. There is no place like it in the world. You will be astonished at what you see and learn there. A month's outing in those mountains 7000 feet above the sea-level, in an atmosphere pure and invigorating, would add years to your life. There are four modern hotels, good roads—maintained by the United States Government—for riding, driving, or cycling; riding-horses and pack-trains. Geysers, canyons, mud-springs, lakes, cataracts, and cascades in large number are crowded into a space 54 by 62 miles in size. If you can afford it, you wrong yourself by not going there, especially if you are a patriotic American.

VACCINE PURE AND RELIABLE ANIMAL VACCINE LYMPH. Fresh Daily. Send for Illustrated Pamphlet. 10 IVORY POINTS, Double Charged, $1.00. 10 CAPILLARY TUBES, $1.00. Orders by Mail or Telegraph Promptly Dispatched. **VIRUS.**

NEW ENGLAND VACCINE CO., Chelsea Station, BOSTON, MASS.

WM. C. CUTLER, M D CHAS. N. CUTLER, M.D.

AS AN ANODYNE AND HYPNOTIC

...KRYOFINE...

(Methoxacet–p–phenetidin)

IS POWERFUL AND WITHOUT ILL EFFECTS.

DR. GEORGE F. BUTLER, Professor of Materia Medica and Clinical Medicine, College of Physicians and Surgeons, Chicago; Attending Physician Cook County Hospital, etc., in the course of an article in the Chicago Clinic, says:

"With the exception of morphine, no drug possesses so positive, prompt and efficient an analgesic property as Kryofine; indeed there are painful disorders—such as migraine, and particularly the pains of locomotor ataxia and certain spinal diseases—where Kryofine seems nearly as efficient as morphine, and attended with less unpleasant sequelæ."

In the services of Drs. J. Rudisch, A. Meyer and A. G. Gerster, Mt. Sinai Hospital, New York, it was found that:

"As a hypnotic in insomnia, unaccompanied by severe pain, it has proved of undoubted value."

"In a case of acute suppurative arthritis, general sepsis and pericarditis, the drug did not affect the pulse. When the child was restless at night, 2½ grains of Kryofine produced a quiet sleep, lasting several hours."—DRS. HAAS and MORRISON, New York Med. Journal.

Dose:—4-7½ grs., tablets or crystalline powder. Literature and Samples sent on request.

C. BISCHOFF & CO., NEW YORK.

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®

Notes and Comments (continued).

If you cannot afford it, then go to beautiful Leech Lake, in Minnesota, a new and popular resort. Leech Lake offers new hotels, fine fishing and hunting, and good boating at reasonable rates. Send Charles S. Fee, of the Northern Pacific Railway, St. Paul, Minn., six cents for Wonderland, '98, that describes by pen and picture both resorts. Mention where the advertisement was seen

---

Good Winter Reading for farmers in the Eastern States is now being distributed by the Chicago, Milwaukee and St. Paul Railway, free of charge to those who will send their address to H. F. Hunter, Immigration Agent for South Dakota, Room 565, Old Colony Building, Chicago, Ill.

The finely-illustrated pamphlet, "The Sunshine State," and other publications of interest to all seeking new homes in the most fertile section of the West will serve to entertain and instruct every farmer during the long evenings of the winter months. Remember, there is no charge. Address as above.

F. Hopkinson Smith's New Story.—F. Hopkinson Smith contributes his new story, "A Kentucky Cinderella," to the Christmas Ladies' Home Journal. It is a sweet little romance, charmingly told by an old-time colored "mammy," who, in her way, is as interesting and delightful a character as "Colonel Carter, of Cartersville," another creation of Mr. Smith's graceful pen.

An Unparalleled Time-Record was made every day during the period of the

ELIXIR IODO-BROMIDE OF CALCIUM COMP. (TILDEN'S).

Unequaled as a Blood Tonic, Alterative, and Reconstructent. In cases of Syphilis, Scrofula, Tuberculosis, Abscesses, and all Blood Humors.

FIRWEIN (TILDEN'S).

Prescribed by prominent physicians throughout the country in all forms of Bronchitis, Catarrh, Phthisis, Throat and Lung Troubles. In Chronic Cystitis it relieves the annoying symptoms almost like magic, being regarded as a friend of humanity.

RESPIRAZONE (TILDEN'S).

For the immediate relief and cure of Spasmodic Asthma (acute or chronic), Hay Fever, and Croup. Physicians prescribe it with unvarying results.

ELIXIR MALTOPEPSINE (TILDEN'S).

An important remedial agent for Indigestion, Dyspepsia, Loss of Appetite, Constipation, Vomiting in Pregnancy, Diarrhœa, and Nervousness.

LIQUID ANTIPYRETIC (TILDEN'S).

Analgesic, Antipyretic, Anodyne, and Antalgic, indicated in all forms of Neuralgia, La Grippe, Typhoid and Malarial Fevers, Rheumatism, and Sciatica.

LITERATURE FURNISHED ON APPLICATION.

PREPARED ONLY BY THE TILDEN COMPANY, MANUFACTURING PHARMACISTS,

NEW LEBANON, N. Y. ST. LOUIS, MO.

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®

Notes and Comments (continued).

Omaha Exposition by the trains of the Chicago, Milwaukee & St. Paul Railway on its Chicago and Omaha Short Line.

Although its trains hauled from ten to thirteen well-filled sleeping-cars and coaches each night, yet schedule time of arrival at Omaha and Chicago was an accomplished fact,—a record to be proud of, and which has resulted in establishing the Chicago, Milwaukee & St. Paul Railway in the minds of the traveling community as the shortest, best, and most reliable route from Chicago to Omaha, as well as to California.

All coupon ticket agents sell tickets via the Chicago, Milwaukee & St. Paul Railway. For information regarding the line address John R. Pott, District Passenger Agent, 486 William Street, Williamsport, Pa.

Hypertrophic Rhinitis.—"In the treatment of hypertrophic rhinitis do not forget to clean the passages; this is the fundamental principle of successful treatment. A saline solution, such as glyco-thymoline (Kress), is practically the best remedy for the purpose. It cleanses and it heals, it causes a proper degree of healthy stimulation, it acts as an antiseptic, and is a most efficient deodorizer."—Journal of the American Medical Association, October 24, 1896.

To the Land of Sunshine.—Take the Sunshine Route from Chicago to Los Angeles, San Francisco, and other points in California, and escape the rigors of winter in the East and North. Pullman tourist-cars for first- and second- class passengers leave Chicago every Saturday at 2 o'clock P.M. via the Chicago, Milwaukee & St. Paul Railway to Kansas

White Rock Ozonate Lithia Water

PLEASES PARCHED PALATES PERFECTLY.

People drink it because they like it; hence the uniform success reported by thousands of physicians who prescribe it.

Bottled Only by

WHITE ROCK MINERAL SPRINGS CO., Waukesha, Wis.

Digitized by Microsoft

Notes and Comments (continued).

City, thence to California via the Atchison, Topeka & Santa Fé Railway: a real Sunshine Route. This is the earliest afternoon-train leaving Chicago for the West after the arrival of morning trains from the East, and thus avoids tedious delay. The Sunshine Route is essentially the best and most patronized through car-line for men, women, and children. Every attention is paid to the needs of passengers en route. Send for a Sunshine-Route time-table folder. It costs nothing. Address John R. Pott, District Passenger Agent, 486 William Street, Williamsport, Pa.

Food and Drink.—The Esperanza and Hygeia brands of Grape Juice are both food and drink for the well or sick, and indispensable in a perfect dietary.—John S. Linsley, M.D., New York City.

Milk-infection.—"I have just had an opportunity of seeing the wonderful value of Imperial Granum in milk-infection. I ordered the baby to be fed on Imperial Granum, prepared with pure water only, increasing by one teaspoonful the quantity of Imperial Granum directed to be used when prepared with milk. An immediate improvement and most satisfactory recovery of the case was the result." ——— M.D.

To The Imperial Granum Co., New Haven, Conn.

Indigestion.—I have no hesitation in pronouncing your compound digest the best remedy I have ever used for the troubles for which you recommend it. This I affirm after several years of experience with it in my practice.

H. Keeler, M.D.

Chicago, March 12, 1897.

BALTIMORE AND OHIO IS THE BEST ROUTE TO BALTIMORE AND WASHINGTON

SIGNS GLASS & METAL SIGNS
HIGHEST GRADE
FOR PHYSICIANS, DENTISTS ETC.
J.W. RUSSELL & CO.
MFR'S 294 PEARL ST. NEW YORK.
WRITE FOR PRICE LIST.

Trade B-C-D. Mark.
DR. BECKER'S COMPOUND DIGEST.
(*Digestinia Composita. Dr. Becker.*)

is prepared according to the formula of Dr. Becker, from principles obtained by his processes, from the digestive organs of clean animals and fowls.

It assists impaired and overworked digestive organs, allowing them to rest without lessening nutrition

It is easily administered, and, being free from chemicals, does not interfere with the action of other medicines.

Sold only in bottles containing 550 grains powder form or 100 five-grain Tablets, and may be ordered through any druggist. Samples sent by mail to physicians on application.

DR. BECKER COMPOUND DIGEST CO.,
107 Dearborn Street, CHICAGO, ILL.

Digitized by Microsoft®

THE SANITARIUM, BATTLE CREEK, MICH.

INCORPORATED 1867.

THE largest, most thoroughly equipped and one of the most favorably located in the United States. It is under strictly regular management. Eight physicians, well-trained and of large experience. A quiet home-like place, where "trained nurses," "rest-cure," "massage," "faradization," "galvanization," "static electrization," "Swedish movements," "dieting," "baths," "physical training," and all that pertains to modern rational medical treatment can be had in perfection at reasonable prices. Special attention given to the treatment of chronic disorders of the stomach, and diseases peculiar to women. A special hospital building (100 beds) for surgical cases with finest hospital facilities and appliances.

Large fan for winter and summer ventilation. Absolutely devoid of usual hospital odors. Delightful surroundings. Lakeside resort. Pleasure grounds, steamers, sailboats, etc. Trained nurses of either sex furnished at reasonable rates. **J. H. KELLOGG, M. D., Supt., Battle Creek, Mich.**

℞ NUT-GLUTEN BISCUIT: Made from the purest wheat gluten and nut meal. The only food on the market to-day that diabetics may eat of freely, without danger. Prescribed and endorsed by the physicians of the Battle Creek Sanitarium. Samples free to physicians when card is enclosed with the request. Others may have them for two 2c stamps.

BATTLE CREEK SANITARIUM HEALTH FOOD CO., Battle Creek, Mich.

Digitized by Microsoft®

Artistic Home Decorations.

We can show you effects NEVER before thought of, and at moderate prices, too.

Why have your house decorated and painted by inferior workmen, when you can have it done by skilled workmen—by Artists—for the same price?

If you intend Decorating, if only one room, call or send to see what we are doing, and for whom.

TAPESTRY PAINTINGS.

2000 tapestry paintings to choose from. 38 artists employed, including gold medalists of the Paris Salon. Send 25 cents for compendium of 140 studies. When in the city be sure to call and see our exhibition.

WALL PAPERS.

New styles, designed by gold-medal artists. From 10 cents per roll up. Send 50 cents to prepay expressage on large sample books and drapery. Will include drapery samples in package. See our Antique Metallic, French, Pressed Silks, and Lida effects in special colors to match all kinds of wood-work, carpets, and draperies. Have 500 different wall-hangings with draperies specially made at our Broomhead Mills, Paterson, N. J., to match.

DECORATIONS.

Color-schemes—designs and estimates submitted free. Artists sent to all parts of the world to do every sort of decorating and painting. We are educating the country in color-harmony. Relief, stained glass, wall-paper, carpets, furniture, draperies, etc. Pupils taught.

DECORATIVE ADVICE.

Upon receipt of $1 Mr. Douthitt will answer any question on interior decorations—color-harmony and harmony of form, harmony of wall-coverings, carpets, curtains, tiles, furniture, gas-fixtures, etc.

MANUAL OF ART DECORATIONS.

The art-book of the century. 200 royal quarto pages, filled with full-page colored illustrations of modern home interiors and tapestry studies. Price $2.

If you want to be up in decoration send $2 for this book; worth $50.

SCHOOL.

Six 3-hour tapestry painting lessons, in studio, $5. Complete written instructions by mail, $1. Tapestry paintings rented; full-size drawings, paints, brushes, etc., supplied. Nowhere, Paris not excepted, are such advantages offered pupils. New catalogue of 125 studies, 25 cents.

Send $1 for complete instructions in tapestry painting and compendium on 140 studies.

TAPESTRY MATERIALS.

We manufacture tapestry materials superior to foreign goods and half the price. Book of samples, 10 cents.

Send $1.50 for 2 yards No. 6, 50-inch goods, just for a trial order; worth $3. All kinds of draperies to match all sorts of wall papers, from 10 cents per yard up. THIS IS OUR GREAT SPECIALTY.

GOBLIN-PRINTED BURLAPS.

Over 100 new styles for wall-coverings, at 25 cents per yard, 35 inches wide, thus costing the same as wall-paper at $1 per roll. 240 kinds of Japanese lida leather papers at $2 per roll.

GOBLIN ART DRAPERY.

Grecian, Russian, Venetian, Brazilian, Roman, Rococo, Dresden, Festoon, College Stripe, Marie Antoinette, Indian, Calcutta, Bombay, Delft, Soudan.

In order that we may introduce this line of New Art Goods, we will send one yard each of 50 different kinds of our most choice Patterns for $7.50.

JOHN F. DOUTHITT,

American Tapestry Decorative Co., **286 Fifth Avenue, New York.**
Near 30th Street.

Digitized by Microsoft®

A NEW IDEA IN
TRUNKS.

The Stallman Dresser Trunk is constructed on new principles. Drawers instead of trays. A place for everything and everything in its place. The bottom as accessible as the top. Defies the baggage smasher. Costs no more than a good box trunk. Sent C. O. D. with privilege of examination. Send 2 cents for illustrated catalogue.

F. A. STALLMAN,

3 W. Spring Street, Columbus, Ohio.

Climate Cure

For
Weak Lungs,
Weak Throats,
Weak Bodies.

The Health Resorts of New Mexico and Arizona

are unrivaled. Pure, dry air; an equable temperature, the right altitude, constant sunshine.

Send for descriptive pamphlets issued by Santa Fé Route Passenger Department.

General Passenger Office,

The Atchison, Topeka & Santa Fe Railway,

CHICAGO.

WAMPOLE'S LIQUID WHEAT.

Each teaspoonful represents **one ounce** of **all** parts of the **whole wheat grain**, partly predigested and concentrated *in vacuo;* has sufficient **diastase** to digest five times its weight of dry starch, and contains one-eighth grain U. S. P. Pepsin.

Liquid Wheat contains over **seven per cent.** of the **Nutrient Organic Hypophosphites**, obtained solely from wheat, principally from the germ and cortical portions. Contains all the elements of nutrition, and is an efficient aid to the digestion of both **starchy** and **nitrogenous** foods. Valuable as a supplementary diet for growing children, insuring sufficient **tooth nutrition**, allaying **nervous irritability**, and inducing **plumpness.**

SAMPLES AND LITERATURE CHEERFULLY FURNISHED UPON APPLICATION.

Prepared by

HENRY K. WAMPOLE & CO.,

Manufacturing Pharmacists, Philadelphia, Pa.

EDWIN S. JOHNSTON,
Principal and Founder

"DO NOT STAMMER."

Office of the Postmaster-General,
Washington, D. C., December 29, 1892.

MR. E. BROWN.

DEAR SIR:—Answering your letter, just received: I am acquainted with E. S. Johnston, who used to be a frightful stammerer. He cured himself, and I have seen a great many others whom he has cured. I have confidence in his treatment. Yours truly,

JOHN WANAMAKER.

CURED AFTER STAMMERING OVER THIRTY YEARS.

The New Jersey State Reform School
Jamesburg, June 11, 1893.

DR. E. S. JOHNSTON.

DEAR FRIEND:—It is now over a year since I placed myself under your care for the cure of stammering. I was a confirmed stammerer from childhood and cannot remember when I did not stammer. I was thirty-nine (39) years of age when I went under your treatment. Have had no difficulty in talking since I came home, after being eight weeks at your Institute. People who knew me as a stammerer can scarcely believe that such a severe case could be cured in so short a time. I can safely say that anyone can be cured at your Institute if they follow your instructions. Sincerely yours, JOHN H. ENRIGHT.

Send for 60-page book to the PHILADELPHIA INSTITUTE, 1033 Spring Garden St., Philadelphia, Pa. Established 1884. **EDWIN S. JOHNSTON, Principal and Founder** (who cured himself after stammering 40 years).

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®

PEPPER WHISKY

ESTABLISHED 1780

THE GENUINE HAS THIS COUPON
PULL OFF ONLY When Bottle is EMPTIED PATENTED
EXTRA CAUTION
Anyone refilling this bottle without destroying the labels is criminally liable and on detection will be prosecuted to the full extent of the law
DISTILLERY BOTTLING
OLD PEPPER WHISKY
ESTABLISHED 1780
THE OLDEST & BEST BRAND OF WHISKY MADE IN KENTUCKY
PEPPER DISTILLERY HAND MADE SOUR MASH
ESTABLISHED 1780
JAS. E. PEPPER & CO. DISTILLERS. LEXINGTON, KY.
TRADE MARK
Jas. E. Pepper & Co.
LEXINGTON, KY.
READ COUPON ON BACK OF THIS LABEL

BUY GENUINE DISTILLERY BOTTLING ONLY

FROM HONEST DEALERS OR THE DISTILLERY DIRECT

AND THUS AVOID IMITATIONS AND REFILLED BOTTLES

Genuine distillery bottling of Old Pepper Whisky, distilled only by Jas. E. Pepper & Co., Lexington, Ky., under the same formula for more than 100 years, is guaranteed absolutely the purest and best in the world. Sample case, $15.00, sent on trial, which, if not perfectly satisfactory, can be returned and money will be refunded.

Read and save coupons on genuine Distillery Bottling of Old Pepper Whisky and see who gets the $5500 in 1898, in addition to $1.00 per dozen.

Been giving satisfaction for 118 years---need we say more ?

Digitized by Microsoft®

DO YOU WISH to be brought into direct touch with the Ablest Writers and the Ripest Thinkers? If so then to you THE LIVING AGE is a necessity. It presents, as no other magazine does, the world's movement along every line. No sphere of thought or action is left untouched, but the reader is kept informed on all subjects that move the mind or stir the imagination.

It reproduces the latest utterances of the highest **British** and **Continental** authorities, **French, German, Spanish, Italian, Russian,** etc., upon questions of international politics, and the freshest contributions in every field of literature, **Science, Investigation, Travel, Discovery, History, Art** and **Biography;** and prints in every number Short and Serial Stories of high excellence.

A COMPLETE COMPENDIUM OF CONTEMPORARY LITERATURE AND THOUGHT.

FORMING FOUR LARGE VOLUMES annually, aggregating about 3500 double-column, octavo pages. It alone, among current magazines, has the space to present with **Completeness and Freshness** all that is of immediate interest, or of solid, permanent value in **Foreign Periodical Literature.**

PRACTICAL AND POPULAR, it appeals to all alert and intelligent readers.

OBSERVE! **The Living Age** is a Weekly Magazine giving **Three and a Half Thousand** double-column octavo pages of reading matter yearly, forming four large volumes; representing a mass of matter **Unequalled in Quality and Quantity** by any other publication in the country.

Published Weekly at $6.00 a year, postpaid. Sample Copy 10c.

FREE FOR THE REMAINDER OF THE YEAR. To all **New Subscribers** for the year 1899, remitting before Jan. 1st, the weekly numbers of 1898, *issued after receipt of their subscriptions*, will be sent **Free.**

CHOICEST LITERATURE AT CLUB PRICES. For $9.00 THE LIVING AGE and any $4.00 monthly Magazine, (or *Harper's Weekly* or *Bazar*), sent for a year, or for $8.00 THE LIVING AGE and any $3.00 Magazine.

THE LIVING AGE CO., P. O. BOX 5206, BOSTON, MASS.

Digitized by Microsoft®

SYR. HYPOPHOS. CO., FELLOWS

Contains the Essential Elements of the Animal Organization—Potash and Lime;

The Oxidising Agents—Iron and Manganese;

The Tonics—Quinine and Strychnine;

And the Vitalizing Constituent—Phosphorus; the whole combined in the form of a Syrup with a **Slightly Alkaline Reaction.**

It Differs in its Effects from all Analogous Preparations; and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

It has Gained a Wide Reputation, particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt; it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation with the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and induces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

Medical Letters may be addressed to ***Mr. FELLOWS, 48 Vesey Street, New York.***

Virginia Hot Springs

Open All the Year. **2,500 FEET ELEVATION. ON CHESAPEAKE & OHIO RAILWAY.**

THE NEW HOMESTEAD,

a grand new hotel completed last year, equipped and furnished throughout in accordance with the latest designs and most modern improvements. The Virginia, the Annex, and ten new cottages clustered near the Homestead. A handsome new Casino adds greatly to indoor enjoyment.

Golf Links and Club House, Tennis Courts, Billiards, Pool, Riding School and Fine Livery.

MAGNIFICENT MOUNTAIN SURROUNDINGS. FINEST BATH-HOUSE IN AMERICA.
MOST CURATIVE BATHS KNOWN

for rheumatism, gout, and nervous troubles. All baths from flowing streams of natural hot water.

Located nearly midway between Washington, Old Point Comfort, and Cincinnati or Louisville. Hot Springs is an exceptionally convenient and delightful stopping-place for west-bound travelers.

Special Pullman Compartment Car leaves Pennsylvania Station, New York, 4 50 P.M., Tuesday, Thursday, and Saturday, and arrives at Hot Springs via Washington, 7.25 A M. Dining car.

Excursion tickets, baggage checks, and Pullman Reservations at Chesapeake & Ohio Railway Offices, 362 and 1323, Broadway, New York, also offices Pennsylvania Railroad and connecting lines.

For illustrated pamphlets and further particulars, address W. H. GREEGOR, General Agent Passenger Department Chesapeake and Ohio Railway, Washington, D. C., or

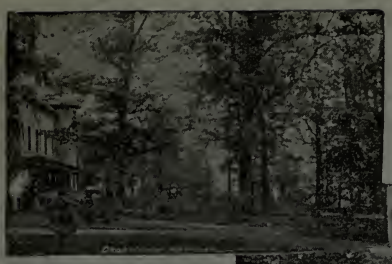
FRED STERRY, Manager, Hot Springs, Bath Co., Va.

In writing to advertisers mention Monthly Cyclopædia

Digitized by Microsoft®

Oak Grove Hospital

For Nervous and Mental Diseases.



Grounds comprise sixty acres of stately oaks and are picturesque and secluded. Buildings roomy, homelike, free from institutional features, and erected with especial reference to the care of nervous and mental invalids.

Interiors Bright and Cheerful, Luxurious Furnishings, Superior Appointments, Skilled Attendance, First-class Cuisine.

Equipment for hydrotherapeutic and electrical treatment complete and modern—Static, Galvanic, and Faradic Apparatus, Electric Bath, Turkish and Russian Baths, and Massage. Noyes Amusement Hall in connection with the Hospital, containing gymnasium, billiard-room, bowling-alley, hall for assemblies, sitting-room, lounging-room, and library, furnishes ideal facilities for in-door sports and diversion. Carriages for the daily use of patients free. For terms, address

Dr. C. B. BURR, Medical Director,
FLINT, MICH.

HAEMOGLOBINOGENETIC.

"I have used your GUDE'S PEPTO-MANGAN with splendid results, and I prescribe exclusively your preparation in cases of Chlorosis, as I have found it the best Haemoglobinogenetic remedy in the market.'

This is what a prominent Physician says of

Pepto-Mangan ("Gude")

TO SECURE THE PROPER FILLING OF YOUR PRESCRIPTIONS,

Order PEPTO-MANGAN (Gude) In Original Bottles. (℥ xi)

IT'S NEVER SOLD IN BULK.

M. J. BREITENBACH COMPANY,

Sole Agents for U. S. and Canada,

56-58 WARREN ST., NEW YORK.

LABORATORY:
LEIPZIG, GERMANY.

HYDROZONE

(30 volumes preserved aqueous solution of H_2O_2)

IS THE MOST POWERFUL ANTISEPTIC AND PUS DESTROYER.
HARMLESS STIMULANT TO HEALTHY GRANULATIONS.

GLYCOZONE

(C. P. Glycerine combined with Ozone)

IS THE MOST POWERFUL HEALING AGENT KNOWN.

These Remedies cure all Diseases caused by Germs.

Successfully used in the treatment of Gastric and Intestinal Disorders (chronic or acute):

DYSPEPSIA, GASTRITIS, GASTRIC ULCER, HEART-BURN, CONSTIPATION, DIARRHŒA, Etc.

"Half an hour before meal, administer from 4 to 8 ozs. of a mixture containing 2 per cent. of **Hydrozone** in water. Follow after eating with **Glycozone** in one or two teaspoonful doses well diluted in a wineglassful of water."

Send for free 240-page book "Treatment of Diseases caused by Germs," containing reprints of 120 scientific articles by leading contributors to medical literature. Physicians remitting 50 cents will receive one complimentary sample of each, "Hydrozone" and "Glycozone" by express, charges prepaid.

Hydrozone is put up only in extra small, small, medium and large size bottles bearing a red label, white letters, gold and blue border with my signature.

Glycozone is put up only in 4-oz., 8-oz. and 16-oz. bottles bearing a yellow label, white and black letters, red and blue border with my signature.

Marchand's Eye Balsam cures all inflammatory and contagious diseases of the eyes.

Prepared only by

Charles Marchand

Chemist and Graduate of the "Ecole Centrale des Arts et Manufactures de Paris" (France).

CHARLES MARCHAND, Removed to **57-59 Prince St., New York.**

Sold by leading Druggists. **Avoid imitations.** **☞ Mention this Publication.**

FOR CHILDREN
employ

"The Safest of all Modern Antipyretics."

LACTOPHENIN

Pediatrics (March 15, 1897) quotes from a "Report on New Remedies," by Dr. P. Phillip (*Archiv für Kinderheilkunde*):—

"Stein, Strauss, Schlutius, and Riede publish their experience with *lactophenin*. Its sedative qualities, which make it useful, particularly in typhoid fever, are praised by most of its friends. According to Stein it may be used whenever phenacetin is indicated. Because of its relative safety and possibility of longer use it is much superior to phenacetin. Riede calls it a specific in acute articular rheumatism, producing no ear-symptoms or depression of the heart, as does salicylic acid and salophen."

This summary of the therapeutic value of lactophenin has been variously confirmed by clinical reports during the past year from sources widely apart. We note, for instance, in a report on "Treatment of Typhoid Fever in Children," by **Dr. F. Gordon Morrill,** Visiting Physician at the Children's Hospital of Boston, Mass. (in *Archives of Pediatrics*, March, 1897), that lactophenin is used in that institution, and that 3 to 8 grain doses "are very effective, and do no harm, as far as my experience goes." Lactophenin produces a drop of 3.5° F. in four hours, according to careful records. "Restful sleep may often be obtained in this way."

Descriptive Pamphlets Mailed on Request

C. F. BOEHRINGER & SOEHNE
7 CEDAR STREET, NEW YORK

Lactophenin is sold by all Druggists